

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 JUN -9 PM 2:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 752702

1. Corporation Name

TOWER FORUM, INC.

Principal Place of Business

Mailing Address

P.O. BOX 39564  
FORT LAUDERDALE, FL 33339

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

N/A

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

N/A

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

6/2/80

5. FEI Number

59-2194903

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	PATRICIA KEARSON	2666 N.E. 35 DRIVE	FORT LAUDERDALE, FL 33308-6314
TD	KATHY KOCH	888 E. LAS OLAS BLVD.	FORT LAUDERDALE, FL 33301
PD	JOEL K. GUSTAFON	1 E. BROWARD BLVD. 13TH FLOOR	FORT LAUDERDALE, FL 33301
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8. Name and Address of Current Registered Agent

PATRICIA KEARSON  
2666 N.E. 35 DRIVE  
FORT LAUDERDALE, FL 33308

9. Name and Address of New Registered Agent

Name N/A  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City State Zip Code  
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0506, F.S.

Signature of Registered Agent

*Patricia N. Kearson*

HE REGISTERED AGENT MUST SIGN

Date 6/2/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes

No

N/A (See other side for information on intangible tax.)  
NOT FOR PROFIT

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Nancy B. [Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/2/98  
Date

954-761-1749  
Daytime Phone

CRRE040 (1-98)



Coopers & Lybrand L.L.P.

a professional services firm

200 South Biscayne Boulevard  
Suite 1900  
Miami, Florida 33131

telephone (305) 375-7400

facsimile (305) 375-6221

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Re:**

Taxpayer: Tower Forum, Inc.  
EIN: 59-2194903  
Tax Period: 1997 - 1998

Dear Sir or Madam:

The above referenced taxpayer requested that we contact you regarding the reinstatement of Tower Forum, Inc. It is our understanding that due to the non-filing of the annual report in May 1997, the taxpayer, as a corporate entity, was dissolved. The non-compliance was due to miscommunication between the current director and her predecessor in that the annual report and notice of termination were both addressed to the prior director and consequently not forwarded to the new director.

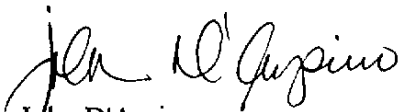
Upon the Department of State ("Department") making our firm aware of this situation, we immediately contacted the taxpayer and made arrangements to file the appropriate reinstatement forms and comply with the state's regulations. Consequently, we have enclosed a completed Application for Reinstatement for the above referenced taxpayer with \$131.25 which represents payment of \$61.25 for both the 1997 and 1998 annual fees and \$8.75 for the certificate of status.

The Department will make a determination of whether the taxpayer's noncompliance was due to reasonable cause and not to willful negligence, will neglect, or fraud based on the facts and circumstances of the specific case. Based on the facts and circumstances discussed above, the noncompliance was clearly due to reasonable cause and not willful negligence, willful neglect or fraud.

Except for this occurrence, the taxpayer has been in good standing with the Department and has made a prudent effort to be in compliance with all of its filing requirements. We believe the taxpayer's noncompliance was due to reasonable cause or, at most, human error and not willful neglect. Consequently, we respectfully request that the Department waive/abate all reinstatement fees attributable to the non-filing of the annual reports.

Should you need additional information in resolving this matter, please do not hesitate to contact me at your earliest convenience at (305) 375-6372

Very truly yours,

  
John D'Arpino  
Tax Manager

cc: Patricia Kearson