

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F00000000087

1. Corporation Name

CHRISTIAN WEBER, INC.

FILED

02 DEC 12 AM 10:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

250 WEST 57TH STREET
STE 2018 1216
NEW YORK NY 10107

Mailing Address

250 WEST 57TH STREET
STE 2018 1216
NEW YORK NY 10107



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

01/03/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

11-3077299

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	KOHLI, VIVEK	145 WEST 67TH STREET APT 5G	NEW YORK NY
V	MANJREKAR, INDIRA	40 RIVER ROAD APT 21A	NEW YORK NY

200008820412
11/06/02--01038--019 **150.00

200008820412
11/06/02--01038--020 **8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MAJREKAR, VIJAY
12663 S DIXIE HWY
MIAMI FL 33156

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/28/02

11. 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:

SIGNATURE REQUIRED
MANJREKAR

Date

10/25/02

Daytime Phone #

212 245 9121

2012

Christian Weber Inc.

250 W 57 Street, Suite 1216
New York, N.Y. 10107
Tel. (212) 245-9121 Fax (212) 245-3613

December 3, 2002

Florida Dept. of Revenue
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Christian Weber Inc.
Ref. Number: F00000000087
Letter no. 202A00061762

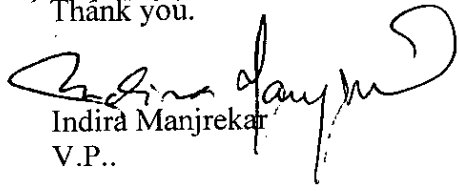
I have received your letter of November 14, 2002.

I had called the Tax Dept. before sending my application for Re-instatement. And I was told that I should send a letter explaining that I had not received the re-instatement form earlier, and that is the reason I could not file the application. And I sent my application accordingly with a letter requesting waiver of penalty, and a check for \$158.75. Enclosed is a copy of my earlier letter.

Again, I am sending this request for waiver of \$581.25 – after contacting Your Department. I was told to send another request for waiver of \$581.25. Please re-consider our request and re-instate the Corporation.

Please note that our suite no. is 1216.

Thank you.


Indira Manjrekar
V.P..