

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JAN 29 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F01000005259

1. Corporation Name

JOAN CAPITAL DESIGN CORPORATION OF DE
CAPITAL DESIGN CORPORATION W01-2320

2. Principal Office Address

3305 JONATHAN HARBOUR DR. SAME

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

JUPITER, FL

City & State

Zip

33477

Country

PALM BEACH

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/09/2001

5. FEI Number

52-2345113

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JOAN L. DAY

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

3505 JONATHAN HARBOUR DRIVE

Suite, Apt. #, etc.

300087497089

02/06/07--01041--016 **750.10

City

JUPITER

State

FL

Zip Code

33477

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Date

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CPST	JOAN L. DAY	3505 JONATHAN HARBOUR DR	JUPITER, FL 33477

K. Eckel JAN 30 2007

10. 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 contained in Chapter 119, 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:

Joan L. Day

JOAN L. DAY

1/8/07

Date

561-743-2460

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



O'FRIA & COMPANY, P.C.
CERTIFIED PUBLIC ACCOUNTANTS

CARL J. O'FRIA, CPA
MICHAEL C. MYERS, CPA, MST
CARL J. O'FRIA, JR., CPA
JOHN J. MILLER, CPA
THOMAS M. BRINKER, JR., LLM, CPA
MEMBERS:
AMERICAN INSTITUTE OF CPA'S
PENNSYLVANIA INSTITUTE OF CPA'S

2/2

January 2, 2007

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

Re: Capital Design Corporation OF DE
I.D. # 52-2345113

To Whom It May Concern:

Our client, Capital Design Corporation, is submitting the attached Corporate Reinstatement form as it recently came to our attention that annual statements were not filed for the years 2003, 2004, 2005 and 2006 thereby dissolving the Corporation in the State of Florida. This came about as a result of the attorney's search of the records due to the death of the founder and president of the Corporation, Leonard V. Day, Jr., on March 14, 2006. In searching the corporate files no annual reports could be found which leads us to believe that annual reports were never sent to the Corporation. As such, a check for \$600.00 is attached representing four years fees at \$150.00 per year, which will reinstate the Corporation in the State of Florida.

Very truly yours,


Carl J. O'Fria

COF/blc