



2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F05000004963 1. Entity Name ROTHSTEIN-KASS, P.A.					
Principal Place of Business 85 LIVINGSTON AVENUE ROSSLAND, NJ 07088				Mailing Address 85 LIVINGSTON AVENUE ROSSLAND, NJ 07088	
2. Principal Place of Business 4 Becker Farm Road Suite, Apt. #, etc.		3. Mailing Address 4 Becker Farm Road Suite, Apt. #, etc.			
City & State Roseland, NJ		City & State Roseland, NJ		4. FEI Number 22-2131009	
Zip 07068		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UNITED CORPORATE SERVICES, INC. 9200 SOUTH DADELAND BLVD., SUITE 508 MIAMI, FL 33155				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CT STADLIN, BARRY S 85 LIVINGSTON AVENUE ROSSLAND, NJ 07088 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4 Becker Farm Road Roseland, NJ 07068	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP ALTMAN, HOWARD 85 LIVINGSTON AVENUE ROSSLAND, NJ 07088 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4 Becker Farm Road Roseland, NJ 07068	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS KASS, STEVEN A 85 LIVINGSTON AVENUE ROSSLAND, NJ 07088 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4 Becker Farm Road Roseland, NJ 07068	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 900080958529 10/19/06--01058--022 **150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			BARRY S. STADLIN <i>10/9/06</i> 973-994-6666 <small>Date Daytime Phone #</small>		

FILED
06 OCT 18 AM 10:05
CLERK OF STATE
TALLAHASSEE, FLORIDA