

Division of Corporations

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**F2400000000043**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : Vcorp SERVICES, LLC  
Account Number : 120680000067  
Phone : (845) 425-6077  
Fax Number : (845) 818-3538

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

RECEIVED  
2024 JAN -4 AM 11:50  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FOREIGN PROFIT/NONPROFIT CORPORATION  
REGEN, BENZ & MACKENZIE, C.P.A.'S. P.C.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

FILED  
2024 JAN -4 PM 3:48  
SECRETARY OF STATE  
TALLAHASSEE, FL

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA*

1. REGEN, BENZ & MACKENZIE, C.P.A.'S P.C. Corporation  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. NEW YORK 3. 13-3648163  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. FEBRUARY 20, 1992 5. \_\_\_\_\_  
(Date of incorporation) (Date of duration, if other than perpetual)
6. JANUARY 15, 2023  
(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1668 MALON BAY DRIVE, ORLANDO, FL 32828  
(Principal office street address)
- 57 WEST 38TH ST RM 201, NEW YORK, NY 10018  
(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Vcorp Services, LLC

Office Address: 1200 South Pine Island Road  
Plantation FL 33324  
(City) (Zip code)

**9. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

Vcorp Services, LLC

By: [Signature]  
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

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 SECRETARY OF STATE  
 TALLAHASSEE, FL

**A. DIRECTORS**

☒ Chairman Name: SAL MARRA  
☐ Vice Chairman Address: 199 CRESCENT AVE  
☐ Director WYCOFF, NJ 07481  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: SUSAN MACKENZIE  
☒ Vice Chairman Address: 675 HIAWATHA'S PATH  
☐ Director SOUTHOLD, NY 11971  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☒ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: WILLIAM A REGEN  
☐ Vice Chairman Address: 27010 GRAND CENTRAL  
☒ Director PKWY APT 32 W  
☐ President FLORAL PARK, NY 11005  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: MONICA FRIEDRICH  
☐ Vice Chairman Address: 89 OAK RIDGE LANE  
☒ Director ALBERTSON, NY 11507  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

☐ Chairman Name: \_\_\_\_\_  
☐ Vice Chairman Address: \_\_\_\_\_  
☐ Director \_\_\_\_\_  
☐ President \_\_\_\_\_  
☐ Vice President \_\_\_\_\_  
☐ Secretary ☐ Treasurer \_\_\_\_\_  
☐ Other \_\_\_\_\_ ☐ Other \_\_\_\_\_

**Important Notice:** Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. William A. Regan  
 Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. WILLIAM A REGEN DIRECTOR, SECRETARY OF ENTITY  
 (Typed or printed name and capacity of person signing application)

## STATE OF NEW YORK

## DEPARTMENT OF STATE

## Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: REGEN. BENZ & MACKENZIE, C.P.A.'S, P.C.  
DOS ID Number: 1614211  
Entity Type: DOMESTIC PROFESSIONAL SERVICE CORPORATION  
Entity Status: EXISTING  
Date of Initial Filing with DOS: 02/20/1992  
Statement Status: CURRENT  
Statement Due Date: 02/29/2024

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type: CERTIFICATE OF INCORPORATION  
Date of Filing: 02/20/1992  
Entity Name: KRAMER, REGEN, BENZ & ZITOLO, C.P.A.'S, P.C.

Document Type: BIENNIAL STATEMENT  
Date of Filing: 02/25/1993  
Effective Date: 02/01/1993

Document Type: BIENNIAL STATEMENT  
Date of Filing: 02/22/1994  
Effective Date: 02/01/1994

Document Type: CERTIFICATE OF AMENDMENT  
Date of Filing: 10/05/1999  
Name Changed To: REGEN, BENZ & MACKENZIE, C.P.A.'S, P.C.

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Document Type: CERTIFICATE OF AMENDMENT  
Date of Filing: 07/06/2001  
Name Changed To: REGEN, BENZ, MACKENZIE & ANOPOLSKY, C.P.A.'S, P.C.

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Document Type: CERTIFICATE OF AMENDMENT  
Date of Filing: 09/23/2003  
Name Changed To: REGEN, BENZ & MACKENZIE, C.P.A.'S, P.C.

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Document Type: BIENNIAL STATEMENT  
Date of Filing: 09/07/2022  
Effective Date: 02/01/2022

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No information is available from this office regarding the financial condition, business activity or practices of this entity.

WITNESS my hand and official seal of the Department  
of State, at the City of Albany, on December 27, 2023  
at 11:18 A.M.



ROBERT J. RODRIGUEZ, Secretary of State

*Brendan C. Hughes*

By Brendan C. Hughes  
Executive Deputy Secretary of State