

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUN 28 AM 9:06

DOCUMENT # F68225

1. Corporation Name Richard Alan Reiner, D.C., P.A.

2. Principal Office Address

5768 Okeechobee Blvd.

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip
33417

Country
Palm Beach

3. Mailing Office Address

5768 Okeechobee Blvd.

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip
33417

Country
Palm Beach

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida**

2-23-82

5. FEI Number

59-2167389

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

Richard Alan Reiner

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

5768 Okeechobee Blvd.

Suite, Apt. #, Etc.

City

West Palm Beach

State
FL

Zip Code
33417

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

Richard Alan Reiner
REGISTERED AGENT MUST SIGN

Date 6-26-00

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
P	Richard Alan Reiner	5768 okeechobee Blvd.	West Palm Beach, FL 33417

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 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: Richard Alan Reiner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-26-00 (561)689-4700

Date

Daytime Phone #