

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 30 AM 10:44

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F77433

1. Corporation Name

ROBERT B. SCHARF, P.A.

Principal Place of Business

1646 SE 5TH COURT  
DEERFIELD BEACH FL 33441  
US

Mailing Address

1646 SE 5TH COURT  
DEERFIELD BEACH FL 33441  
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

04/21/1982

5. FEI Number

59-2184367

Applied For

Not Applicable

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PST	SCHARF, ROBERT B	<del>1633 SE 6TH ST</del> 1646 S.E. 5 COURT	DEERFIELD BEACH FL 33441
D	SCHARF, ROBERT B	<del>1633 SE 6 ST</del> 1646 S.E. 5 Court	DEERFIELD BEACH FL 33441

300008700809  
10/30/02-01078-010 \*\*150.00

8. Name and Address of Current Registered Agent

SCHARF, ROBERT B. P.A.

1415 E SUNRISE BLVD #410

FT LAUDERDALE FL 33304

Now:  
1646 S.E. 5 Court  
Deerfield Beach, Fla  
33441

9. Name and Address of New Registered Agent

Name

Robert B. Scharf, P.A.

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

1646 S.E. 5 COURT

Suite, Apt. #, Etc.

Deerfield Beach, Fla

City

State

FL

Zip Code

33441

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 10-21-02

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert B. Scharf 954 422 1969

Date

Daytime Phone #

Robert B. Scharf, P.A.  
Attorney At Law  
Fla. Supreme Ct. Certified Civil/Circuit Mediator  
B.B.B. Certified Arbitrator  
Fla. Supreme Ct. Qualified Arbitrator  
1646 S.E. 5<sup>th</sup> Court  
Deerfield Beach, Florida 33441

Attorney and Mediation Specialty:  
Workers' Compensation,  
Claimant and Defense  
Certified Arbitrator  
B. B. B. Auto Line Arbitration Division  
Florida Supreme Court Qualified Arbitrator  
(Fed. Tax I.D. # 59-2184367)

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TO: Division of Corporations  
Annual Report / Reinstatement Section  
P.O. 6327  
DATE: Tallahassee, Fla 32314-6327  
RE: Re-instatement of Corporations

FROM: **ROBERT B. SCHARF, P.A.**  
Florida Bar #221058 (1976) Attorney At Law  
Florida Supreme Court Certified Civil/Circuit Mediator #11506R (1999)  
Certified Arbitrator #27253 (Better Business Bureau Auto Line Program, 2000)  
National Panel of Consumer Arbitrators (2000)  
Florida Supreme Court Qualified Arbitrator (2001)

PAGES TO FOLLOW: 4

TEL: 954-422-1969 (private)

Fax: 954-422-1972 (private)

COMMENT: Gentlemen: As you can see the pre-  
printed information was old and in-  
correct, so I never got the 2 prior  
U.B.R. notices. The new info. provided  
is correct (as is at the top of  
this letterhead). Please findcheck  
for 150. and application for  
re-instatement. Please call if anything  
else is needed. S.B.B.