

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 17 PM 3:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000000003

1. Corporation Name

CASE PAPER CO., INC.

Principal Place of Business

3200 N.W. 119 ST.
MIAMI FL 33167
US

Mailing Address

500 MAMARONECK AVE
HARRISON NY 10528

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

01/03/1995

5. FEI Number

11-1945820

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
DP	SCHAFFER, PETER	500 MAMARONECK AVE	HARRISON NY 10528
DVS	SCHAFFER, I. ROBIN	500 MAMARONECK AVE	HARRISON NY 10528
D	SCHAFFER, S. ANDREW	70 WASHINGTON SR S NYU LEGAL DEP	NEW YORK NY 10003
D	SCHAFFER, FREDERICK P	924 WEST END AVE	NEW YORK NY 10025
CFO	HOCHSTADT, ALAN	500 MAMARONECK AVE	HARRISON NY 10528

8. Name and Address of Current Registered Agent

WIMAN, MARTIN
3200 NW 119TH ST.
MIAMI FL 33167

9. Name and Address of New Registered Agent

Name

GLEN BRAZIEL

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

3200 NW 119TH ST.

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33167

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

Glen Braziel
REGISTERED AGENT MUST SIGN

Date

10/13/03

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:

Peter Schaffer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/10/03

Daytime Phone #

CR2E040 (7/03)

CASE PAPER CO. INC.
500 MAMARONECK AVENUE
HARRISON, NY 10528
(914) 899-3500

10-Oct-03

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

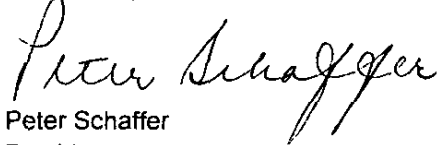
RE: Document # F95000000003

Dear Sir/Madam:

Enclosed please find the application for reinstatement for 2003 corporation annual report/uniform business report and a check in the amount of \$158.75 . I have not received any prior uniform business report notices for the year 2003, as you can see in the past, the report was filing promptly at due date.

Please waive the penalty and reinstate the corporation.

Thank You,

A handwritten signature in cursive script, appearing to read "Peter Schaffer".

Peter Schaffer
President