

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM: **FILED**

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2005 OCT 24 PM 1:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000001998

1. Corporation Name

Edwards & Zuck, PC

2. Principal Office Address

315 Park Avenue South

Suite, Apt. #, etc.

17th floor

City & State

New York, NY

Zip

10010

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

CR2E081 (8/05)

00-05

4. Date Incorporated or Qualified
To Do Business in Florida

April 25, 1995

5. FEI Number

13-2860288

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

CorpDirect Agents, Inc

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

515 East Park Avenue

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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

Ed Lary, Assistant Secretary

Date

10/20/05

REGISTERED AGENT MUST SIGN

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
Pres	Peter J. Sposato	19 Brook Hills Circle	White Plains, NY 10605
VP	Matthew G. Donolli	11 Carlton Drive	Mt Kisco, NY 10549
VP	Patrick G. Sposato	16 Robbins Wood Lane	So. Salem, NY 10590

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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:

Matthew G. Donolli, P.E.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/21/05
Date

212.330.6200
Daytime Phone #

2/2



October 20, 2005

Florida Department of State
Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: Edwards & Zuck, PC
Change of Address and
Registered Agent

To Whom It May Concern:

Please be advised that we changed address and we did not get proper notice to file the annual report and please waive the reinstatement fee.

Very truly yours,


Myrna M. Gardon
Administrator