

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**APPLICATION FOR REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
 Barbara B. Northam  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

97 NOV -6 AM 11: 16

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # **F96000002901**

1. Corporation Name

**PARVIEW, INC.**

Principal Place of Business

Mailing Address

5753 BENEVA ROAD  
 SARASOTA FL 34233

5753 BENEVA ROAD  
 SARASOTA FL 34233



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

06/11/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

88-0330382

Not Applicable

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PT	CHESSLER, DAVID	5753 BENEVA ROAD	SARASOTA FL
D	CHESSLER, JERRY	5753 BENEVA ROAD	SARASOTA FL
D	NEIGHBOR, LEE	5753 BENEVA ROAD	SARASOTA FL
S	HAYES, DENNIS M	120 NORTH 4TH AVENUE	ANN ARBOR MI

600002343496--6  
 -11/10/97--01165--002  
 \*\*\*165.00 \*\*\*165.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PREWETT, DANIEL  
 5777 BENEVA ROAD  
 SARASOTA FL 34233

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

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.

Signature of Registered Agent

*[Handwritten Signature: Daniel Prewett]*

REGISTERED AGENT MUST SIGN

Date

10/28/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes  No

(See other side for Information on Intangible tax.)

12. 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:

*[Handwritten Signature: Daniel Prewett]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/28/97 941-379-5534

Date Daytime Phone #

CR2E040 (8/97)

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**PARVIEW, INC.**  
**5975 Cattlemen Lane**  
**Sarasota, Florida 34232**  
**(914) 379-5538**

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

Re: Parview, Inc.

Gentlemen:

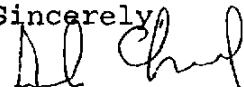
Please find enclosed my reinstatement for the annual renewal registration of our corporation referenced above.

I am only enclosing the normal \$165.00 renewal fee, and respectfully request an abatement of the penalty and surcharge.

We never received the original or any subsequent notice. Our address changed from 5753 Beneva Rd., Sarasota FL to 5975 Cattlemen Lane, Sarasota, FL 34232. It has come to our attention that mail sent to our old address was not being forwarded by our previous landlord and was being destroyed. We believe this was in retaliation for a litigation matter against him that we instituted.

Thanking you in advance for your consideration, I remain

Sincerely,

  
David Chessler  
President

Enc.