

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

00 JAN 11 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F96000005400**

1. Corporation Name

LU HOLDING CORPORATION

Principal Place of Business

Mailing Address

c/o BANKERS TRUST COMPANY
280 PARK AVENUE - 23W
NEW YORK, NY 10017

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

2. New Principal Office Address, If Applicable

130 LIBERTY STREET

3. New Mailing Office Address, If Applicable

130 LIBERTY STREET

Suite, Apt. #, etc.

MAIL STOP 2254

Suite, Apt. #, etc.

MAIL STOP 2310

City & State

NEW YORK, NY

City & State

NEW YORK, NY

Zip

10006

Country

USA

Zip

10006

Country

USA

REINSTATEMENT

99-00

4. Date Incorporated or Qualified
To Do Business in Florida

OCTOBER 17, 1996

5. FEI Number

51-0370723

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

\$9.75 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
DIR/ PRES	JAMES D. EGAN	130 LIBERTY ST. - M/S 2254	NEW YORK, NY 10006
DIR/ VP	ALEXANDER B.V. JOHNSON	130 LIBERTY ST. - M/S 2254	NEW YORK, NY 10006
DIR/ VP	BRUCE P. MORRISON	130 LIBERTY ST. - M/S 2254	NEW YORK, NY 10006
SEC	SANDRA L. WEST	130 LIBERTY ST. - M/S 2310	NEW YORK, NY 10006
TREAS	PHILIP HEIMLICH	130 LIBERTY ST. - M/S 2310	NEW YORK, NY 10006

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
c/o CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

9. Name and Address of New Registered Agent

Name

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

300003099203--3

Suite, Apt. #, Etc.

01/14/00 01076-007

****900.00 ****900.00

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

Connie Bryan

CONNIE BRYAN

SPECIAL ASSISTANT SECRETARY

REGISTERED AGENT MUST SIGN

Date

1/11/2000

1. 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.)

2. 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: Sandra L. West Sandra L. West, Sec. January 10, 2000 250-2161

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KE