

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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03/10/03--01006--029 **908.75

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # TQM000002122

1. Corporation Name
LAURENCE E. APPET, P.C.

2. Principal Office Address -
2 MALCOLM DRIVE
Suite, Apt. #, etc.

3. Mailing Office Address
10526 WHEELHOUSE CIR.
Suite, Apt. #, etc.

City & State
FAIRFIELD N.J.
Zip
07004
Country
USA

City & State
BOCA RATON, FLA.
Zip
33428
Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida 04/22/1997

5. FEI Number
22-3278090
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
LAURENCE E. APPET
Street Address (P.O. Box Number is Not Acceptable)
10526 WHEELHOUSE CIRCLE
Suite, Apt. #, Etc.
City
Boca Raton
State
FL
Zip Code
33428

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 Laurence E. Appet Date Jan. 28, 2003
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	LAURENCE APPET	10526 WHEELHOUSE CIR	Boca Raton, Fla 33428

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: Laurence E. Appet Date Jan 28 2003 Daytime Phone # 561-558-9026
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E031 (10/02)

Zalt

LAURENCE E. APPET, P.C.

10526 Wheelhouse Circle
Boca Raton, Florida 33428

(561) 558-9026 -- Office
(561) 218-5715 -- Facsimile
Appetlaw@aol.com -- E-Mail

January 28, 2003
Department of State
Division of Corporations
409 East Gains Street
Tallahassee, FL. 32399

RE: Laurence E. Appet, P.C
Doc # F97000002122
FEI # 223278090

ATT: Corporate Reinstatement


To Whom It May Concern:

The 1998 Annual reports was never received and never requested. I enclose a completed Corporation Reinstatement form as well as our check in the sum of \$908.75. Kindly waive all other penalties.

Kindly file and return a Certificate of Status to me in the attached envelope.

I thank you for your courtesies. Please advise if you need anything further.

Very truly yours:
LAURENCE E. APPET P.C.


Laurence E. Appet