PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION FOR** REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

FILED

00 DEC -1 AM 8: 18

SECRETARY OF STATE TALLAHASSEE FLORIDA

## F98000005379 DOCUMENT #

1. Corporation Name

DG BAL HARBOUR INC.

Principal Place of Business

C/O DOLCA & GABBONA

Mailing Address

C/O DOLCA & GABBONA



660 MADISON AVE. 10TH FL. 660 MADISON AVE. 10TH FL. NY NY 10021 NY NY 10021 HS If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable Date Incorporated or Qual To Do Business in Florida New Principal Office Address, If Applicable C/o Dolce & Gabbana 09/25/1998 Suite, Apt. #, etc. 10T4F1 5 FFI Number Applied For 660 Madison Ave 660 Madison 13-4017271 Not Applicable New York. New York. \$8.75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED 10021 10021 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Name of Officers City / State / Zip Officer and/or Director Title(s) GGO THIRD AVENUE C/O Doke & Gabbana NEW YORK NY 10817 /0021 PD VELO, LUCIO 660 MADISON AVENUE, 10TH FLOOR 666 THIRD AVENUE C/o Dolca & Gabban NEW YORK NY <del>10017</del> /002/ RUELLA, CRISTIANA **VTD** 660 MADISON AVENUE, 10TH FLO NEW YORK NY 10017 666 THIRD AVENUE Byer, albert a 230 PANK AVENUE, 1174 FLOOR <u>200003484032-</u> 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET Suite, Apt. #, Etc. TALLAHASSEE FL 32301-2525 Zip Code 10. I, being appointed the registered agent of the above name corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Date Registered Agent 11.1 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.

0000145

11/30/00 212-404-8707



ACCOUNT NO. : 072100000032

REFERENCE: 914523 4385779

**AUTHORIZATION:** 

COST LIMIT : \$ 750.00

ORDER DATE: November 30, 2000

ORDER TIME : 11:41 AM

ORDER NO. : 914523-005

CUSTOMER NO: 4385779

CUSTOMER: Al Byer, Esq

SATTERLEE STEPHENS BURKE & SATTERLEE STEPHENS BURKE &

230 Park Avenue

11th Floor

New York, NY 10169

DOMESTIC FILING

NAME: DG BAL HARBOUR INC.

EFFECTIVE DATE:

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS:

returned to CSC in error prior to filing