

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 Oct 21 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F98000006853

1. Corporation Name

U.S. Concepts, Inc.

7000009177437
11/22/02--01099--007 **400.00

REINSTATEMENT 2002

2. Principal Office Address
16 West 22nd Street

3. Mailing Office Address
16 West 22nd Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
New York, New York

City & State
New York, New York

Zip Country
10010 USA

Zip Country
10010 USA

**4. Date Incorporated or Qualified
To Do Business in Florida** December 17, 1998

5. FEI Number 11-3465794
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
United Corporate Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)
9200 South Dadeland Boulevard

Suite, Apt. #, Etc.
Suite 508

City
Miami

State Zip Code
FL 33156-0000

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 *Michael A. Barr, Pres* **Date** 11/6/02
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
Director	John P. Benfield	415 Northern Boulevard	Great Neck, NY 11021
D,VP,Sec	Donald A. Bernard	415 Northern Boulevard	Great Neck, NY 11021
Director	Paul A. Amershadian	415 Northern Boulevard	Great Neck, NY 11021
CEO	Brian Murphy	16 West 22nd Street	New York, New York 10010
Pres.	Bryen Bradford	16 West 22nd Street	New York, New York 10010
VP	Martin Marcus	16 West 22nd Street	New York, New York 10010

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:

Martin Marcus VP-FINANCE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/02
Date

Viv-366-3414
Daytime Phone #

CR2E081 (9/01)