

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 FEB 18 PM 1:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F9900000 1328

1. Corporation Name

Feldman Building Inspections, Inc.

2. Principal Office Address - No P.O. Box #

5675 Aspen Ridge Circle

Suite, Apt. #, etc.

City & State

Delray Beach, FL.

Zip

33484

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

Same

City & State

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

March 10, 1999

5. FEI Number

14-1799443

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/07)

7. Name and Address of Current Registered Agent

Name

Barry M. Feldman

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

5674 Aspen Ridge Circle

Suite, Apt. #, Etc.

City

Delray Beach

State

FL

Zip Code

33484

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Barry M. Feldman Pres.

Date 2-13-08

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
P	Feldman, Barry M.	5674 Aspen Ridge	Delray Beach, FL 33484
S	Feldman, Donna	5674 Aspen Ridge	Delray Beach, FL 33484
	RH		
	REINSTATEMENT	1-08	400118264314 02/18/08--01045--019 **1050.00

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 contained in Chapter 119, 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

Barry M. Feldman PRESIDENT
BARRY M. FELDMAN 2/13/08 (521)865-0701

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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Detail by Entity Name

Foreign Profit Corporation

FELDMAN BUILDING INSPECTIONS, INC.

Filing Information

Document Number F99000001328

FEI Number 141799443

Date Filed 03/10/1999

State NY

Status INACTIVE

Last Event REVOKED FOR ANNUAL REPORT

Event Date Filed 10/04/2002

Event Effective Date NONE

Principal Address

5674 ASPEN RIDGE CIRCLE
DELRAY BEACH FL 33484

Changed 01/19/2001

Mailing Address

4801 LINTON BLVD. 11-A SUITE 222
DELRAY BEACH FL 33445

Registered Agent Name & Address

FELDMAN, BARRY M
5674 ASPEN RIDGE CIRCLE
DELRAY BEACH FL 33484 US

Address Changed: 01/19/2001

Officer/Director Detail

Name & Address

Title PCVD

FELDMAN, BARRY M
4801 LINTON BLVD. 11-A SUITE 222
DELRAY BEACH FL 33445

Title SVCD

Dear Personnel,

As per my conversation with your representative, Tyron Scott on Feb. 12, '08, I am sending you a check for corporate Re-instatement because we did not receive prior notices, and thank you for your consideration in this matter of our concern.

This payment will cover the past years thru 2008 as he had stated.

Thank You Again,

Sincerely,
Barry M. Feldman
Pres.