

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

AND  
FILED

97 OCT 30 PM 2:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # J27184

1. Corporation Name  
LLW CORP.

Principal Place of Business  
AVERBACH, H  
2399 N.W. SECOND AVE.  
MIAMI FL 33137  
US

Mailing Address  
AVERBACH  
2399 N.W. SECOND AVE.  
MIAMI FL 33137  
US

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		08/05/1986	
City & State		City & State		5. FEI Number 59-2712782	
Zip		Zip		Applied For	
Country		Country		Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$8.75 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
ST	AUERBACH, HAROLD	2399 N.E. 2ND AVE.	MIAMI FL
PD	WOLFSON, LYNN R.	2399 N.E. 2ND AVE.	MIAMI FL
VD	WOLFSON, LOUIS, III	2399 N.E. 2ND AVE.	MIAMI FL
VD	CAPRARO, FRANZ	2399 N.E. 2ND AVE.	MIAMI FL
			300002349733-9
			-11/17/97--01159--007
			****165.00 ****165.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

AVERBACH, HAROLD  
C/O WOLFSON INITIATIVE CORP.  
2399 N.E. SECOND AVE.  
MIAMI FL 33137

Name

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

Suite, Apt. #, Etc.

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

*Harold Auerbach*  
REGISTERED AGENT MUST SIGN

Date 10-27-97

11. 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.)

12. 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:

*Harold Auerbach* SEC.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-27-97

Date

305-573-0584

Daytime Phone #

CR2040 (8/97)

# LLW CORPORATION

2399 NE 2 Avenue - Miami, Florida 33137

Phone 305-573-0444 Fax 305-573-0409

October 27, 1997

Sandra B. Mortham  
Secretary of State  
Division of Corporations  
409 East Gains Street  
Tallahassee FL 32399

Dear Ms. Mortham:

As you can see from the form enclosed, LLW Corporation was sent an application for reinstatement.

We have never received the original annual report that was due by May 1st of this year, nor did we receive the second notice concerning the annual report.

I have been told by one of your staff that if we mail to your attention the original \$165 due we will be reinstated immediately.

Yours truly,



Harold Auerbach  
Secretary LLW Corporation, Inc.  
llw/annualrpt.o27