

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 OCT 28 AM 10:54

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J27747

1. Corporation Name

The Rag Shop/Sunrise, Inc.

2. Principal Office Address

Pine Plaza Shop Ctr

Suite, Apt. #, etc.

4151 NW 88th Ave

City & State

Sunrise, FL

Zip

33321

Country

USA

3. Mailing Office Address

The Rag Shop/Sunrise, Inc.

Suite, Apt. #, etc.

111 Wagaraw Road

City & State

Hawthorne, NJ

Zip

07506

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

8/7/86

5. FEI Number

58-1693588

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$1.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 02-03

7. Name and Address of Current Registered Agent

Name

Prentice-Hall Corporation System, Inc.

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

600024204326
10/28/03--01040--002 **16.00.00

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

William M. Edrington

William M. Edrington

Date 10/23/2003

Authorized Representative

REGISTERED AGENT MUST SIGN

The Prentice-Hall Corporation System, Inc.

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
CD	Stanley Berenzweig	111 Wagaraw Road	Hawthorne, NJ 07506
SD	Doris Berenzweig	111 Wagaraw Road	Hawthorne, NJ 07506
VID	Steven Barnett	111 Wagaraw Road	Hawthorne, NJ 07506
V	Judith Lombardo	111 Wagaraw Road	Hawthorne, NJ 07506
P	Jeffrey Gerstel	111 Wagaraw Road	Hawthorne, NJ 07506
V	Daniel L. Anderton	111 Wagaraw Road	Hawthorne, NJ 07506

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:

Daniel L. Anderton

Daniel L. Anderton

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/24/03

(973) 423-1303

Daytime Phone #

CR2E001 (10/02)

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