

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 JAN -4 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # J51550

1. Corporation Name

NOVOSTE CORPORATION

Principal Place of Business

4350-C INTERNATIONAL BLVD
NORCROSS GA 30093

Mailing Address

4350-C INTERNATIONAL BLVD
NORCROSS GA 30093

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

01/08/1987

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2787476

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$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
P/D C/D	WELDON, THOMAS D.	4350-C INTERNATIONAL BLVD	NORCROSS GA 30093
VP/D	LARSEN, CHARLES E.	4350-C INTERNATIONAL BLVD	NORCROSS GA 30093
D	SHAPIRO, STEPHEN	THE WILKERSON GROUP, 666 THIRD AVE.	NEW YORK NY 10017
S	JOHNSON, CHERYL R.	4350-C INTERNATIONAL BLVD	NORCROSS GA 30093
G/D D	WELDON, NORMAN R.	8210 NW 27TH ST.	MIAMI FL 33122
D	HOLMES, STEPHEN W	4350-C INTERNATIONAL BLVD	NORCROSS GA 30093

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MIRKIN, MARK H
1700 PALM BEACH LAKES BLVD.
SUITE 580
W. PALM BEACH FL 33401

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

[Signature]

REQUIRED

REGISTERED AGENT MUST SIGN

Date 12/8/98

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:

[Signature] DAVID N. GILL, CFO

Date

12/3/98 800-717-0904

Daytime Phone #

10/2

<u>Title</u>	<u>Name of Officers and/or Directors</u>	<u>Street Address of each Officer and/or Director</u>	<u>City/State/Zip</u>
VP	Gill, David N.	4350-C International Blvd.	Norcross, GA 30093