

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

01 MAR 27 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J69717**

1. Corporation Name

FT. DUQUESNE INVESTMENT COMPANY

2. Principal Office Address

2424 N. Federal Highway

Suite, Apt. #, etc.

Suite 160

City & State

Boca Raton, FL

Zip

33431

Country

USA

3. Mailing Office Address

2424 N. Federal Highway

Suite, Apt. #, etc.

Suite 160

City & State

Boca Raton, FL

Zip

33431

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

04/28/1987

5. FEI Number

59-2800496

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

W. Rodgers Moore

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

2424 N. Federal Highway

Suite, Apt. #, Etc.

Suite 160

City

Boca Raton

State

FL

Zip Code

33431

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

REGISTERED AGENT MUST SIGN

Date **3-21-01**

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 |
|--------|--------------------------------------|---|----------------------|
| PD | W. Rodgers Moore | 7623 Sierra Terrace | Boca Raton, FL 33433 |
| | | | |
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REINSTATEMENT 99-01

Muns.

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:

W. Rodgers Moore

3/21/01

561-394-7910

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CH2E081 (9/99)

W. RODGERS MOORE, P.A.

ATTORNEY AT LAW

2424 N. FEDERAL HIGHWAY
SUITE 160
BOCA RATON, FLORIDA 33431

PHONE
(561) 394-7910
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(561) 393-6541
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MAILING ADDRESS:
P.O. BOX 7073
BOCA RATON, FLORIDA 33431

VIA FEDERAL EXPRESS

March 22, 2001

Florida Department of State
Division of Corporations
49 Gaines Street
Tallahassee, Florida 32399

**Re: Profit Corporation Reinstatement
FT. DUQUESNE INVESTMENT COMPANY**

Dear Sir/Madam:

Enclosed and filed herewith is the Profit Corporate Reinstatement Form for Ft. Duquesne Investment Company. Also enclosed please find our check in the amount of \$1,050.00 for the reinstatement fee.

If you have any questions, please call me.

Very truly yours,

W. RODGERS MOORE, P.A.


Allison Edwards, Esq.

Enclosures