

02/14/2005 16:48 18502229428

CTCORPORATIONSYSTEM

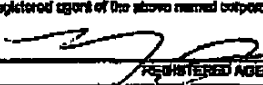
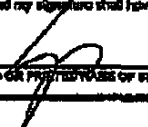
02/14/2005 MON 12:20 FAX

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # L36627					
1. Corporation Name L36627 KARP IC HOLDINGS, INC.					
2. Principal Office Address 8100 SW 10th Street			3. Mailing Office Address 555 Pleasantville Road		
Suite, Apt. #, etc. Suite 2000			Suite, Apt. #, etc. Suite 160 South		
City & State Plantation, FL			City & State Briarcliff Manor, NY		
Zip 33324-3218	Country 	Zip 10510	Country USA	4. Date incorporated or Qualified To Do Business in Florida 12113189	
				5. FEI Number 650168072	Applied For Not Applicable
				6. CERTIFICATE OF STATUS DESIRED ☒ IF YES, indicate on Form DSC-200 for reinstatement of status.	
7. Name and Address of Current Registered Agent					
Name CT Corporation System					
Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road					
Suite, Apt. #, etc. 					
City Plantation			State FL	Zip Code 33324	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the provisions of section 607.0605 or 617.0605, F.S.					
Signature of Registered Agent				Michael J. Mitchell Vice President Date 2/14/05	
REGISTERED AGENT MUST SIGN					
9. Name and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officer and/or Director	Street Address of Each Officer and/or Director		City/State/Zip	
Pres.	Michael Karp	8100 SW 10th Street, Suite 2000		Plantation, FL 33324-3218	
Dir.	Michael Karp	8100 SW 10th Street, Suite 2000		Plantation, FL 33324-3218	
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 179 (79240), F.S. The information included on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.					
SIGNATURE:				Date 2/14/05 800-474-4199	
SIGNATURES AND TITLES OF PREVIOUS OFFICERS OR DIRECTORS					

REINSTATEMENT

97-05

MW

Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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From:

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Account Number : PCA000000023
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CORPORATION REINSTATEMENT

KARP IC HOLDINGS, INC.

Certificate of Status	1
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