

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REINSTATEMENT

04-05

FILED

05 DEC 13 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **10-2000009799**

1. Corporation Name

THE CELEBRITY FOUNDATION, INC

2. Principal Office Address

19667 TURNBERRY WAY

3. Mailing Office Address

510 BROADHOLLOW RD

Suite, Apt. #, etc.

26D

Suite, Apt. #, etc.

301

City & State

AVENTURA FL

City & State

MELVILLE, NY

Zip

33180

Country

Zip

11747

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/18/2002

5. FEI Number

81-0587000

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

MORRIS D MATALON

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

19667 TURNBERRY WAY

Suite, Apt. #, Etc.

26D

City

AVENTURA FL

State

FL

Zip Code

33180

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

Morris D. Matalon

Date

12/8/05

REGISTERED AGENT MUST SIGN

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	MORRIS D MATALON	19667 TURNBERRY WAY	AVENTURA FL 33180
D	ELI MATALON	1145 E 22ND STREET	BROOKLYN NY 11210
D	SAMUEL MATALON	1139 E 22ND STREET	BROOKLYN NY 11210
D	MICHAEL MATALON	2216 AVENUE K	BROOKLYN NY 11210

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:

Morris D. Matalon

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/8/05

Daytime Phone #

212-277-1616