

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 27 AM 8: 36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N42485**

1 Corporation Name
MIGDAL TOWER OF LIGHT, INC.

Principal Place of Business

Mailing Address

4045 Sheridan Avenue
Apt. 212
Miami Beach, FL 33140

REINSTATEMENT

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2 New Principal Office Address, If Applicable
4045 Sheridan Avenue

3 New Mailing Address, If Applicable
4045 Sheridan Avenue

4 Date Incorporated or Qualified
To Do Business in Florida
March 11, 1991

Suite, Apt. #, etc.
Suite 212

Suite, Apt. #, etc.
Suite 212

5 FEI Number
65-0344268

Applied For
Not Applicable

City & State
Miami Beach, FL

City & State
Miami Beach, FL

Zip
33140 Country
U.S.A.

Zip
33140 Country
U.S.A.

6 CERTIFICATE OF STATUS DESIRED ☒ **YES** Additional Fee required (See 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
Dir/ Pres.	Meir Jungreis	3605 Flamingo Drive	Miami Beach, FL 33140
Dir/ Secty	Yehuda Shechter	290 - 174th Street	N.Miami Beach, FL 33162
Dir/ 2nd V.Pres	Norman Donner	4045 Sheridan Avenue, Spt. 212	Miami Beach, FL 33140
Dir/ Treas.	Nillie Jurgreis	3605 Flamingo Drive	Miami Beach, FL 33140
Dir/ Trustee	Evelyn Donner	4045 Sheridan Avenue Apt. 212	Miami Beach, FL 33140
Dir/VP Dir	Barbara Scholonger Loyal Scholonger	17019 W. Dixie Highway 1818 NE 31st Court, #407	N. Miami Beach, FL N. Miami Beach, FL

8 Name and Address of Current Registered Agent

800002051348--8
-01/09/97--01014--010
Norman Donner
4101 Pinetree Drive
Miami Beach, FL

9 Name and Address of Now Registered Agent

Norman Donner
Street Address (P.O. Box Number is Not Acceptable)
4045 Sheridan Avenue
Suite, Apt. #, Etc.
Apt. 212
City
Miami Beach State
FL Zip Code
33140

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 **X** **Norman Donner**
REGISTERED AGENT MUST SIGN

Date **December 26, 1996**

11 Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information on intangible tax.)

12 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: **Norman Donner, 2nd Vice President** December 26, 1996
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #