

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REINSTATEMENT 98

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000001160

1. Corporation Name
BIZ LINK OF SOUTH FLORIDA, INC.

Principal Place of Business Mailing Address

7777 GLADES RD 7777 GLADES RD
SUITE 205 SUITE 205
BOCA RATON FL 33434 BOCA RATON FL 33434

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

2. New Principal Office Address, If Applicable
254 South Military Trail
Suite, Apt. #, etc.
Deerfield Beach
City & State
Deerfield Beach
Zip
33442 Country

3. New Mailing Office Address, If Applicable
254 South Military Trail
Suite, Apt. #, etc.
Deerfield Beach
City & State
Deerfield Beach
Zip
33442 Country

4. Date Incorporated or Qualified To Do Business in Florida
03/09/1995

5. FEI Number
65-0677041 Applied For
Not Applicable

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
✓	GRAY, SHERRY	8246 BOCA RIO RD.	BOCA RATON FL
MD	SCHILDKRAUT, JEFFREY	5550 GLADES RD	BOCA RATON FL
TD	KENNEDY, CHERYL	2064 NE 2 ST	DEERFIELD BEACH FL
P(1)	SCHILDKRAUT, JEFFREY	5550 GLADES ROAD	Boca Raton FL 33486
V(1)	KRUSE, TOM	101 N State Road seven	Mt Dora FL 33063
T(1)	WOLF, Todd	254 SOUTH MILITARY TRAIL	Deerfield FL 33442

8. Name and Address of Current Registered Agent

GLOTZER, BRUCE A
7777 GLADES RD
SUITE 205
BOCA RATON FL 33434

9. Name and Address of New Registered Agent

Name
Todd Wolf

Street Address (P.O. Box Number is Not Acceptable)
254 South Military Trail

Suite, Apt. #, Etc.

City
Deerfield Beach State
FL Zip Code
33442

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 **JEFFREY SCHILDKRAUT** Date **12-2-98**

SIGNATURE REQUIRED REGISTERED AGENT MUST SIGN

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: **JEFFREY SCHILDKRAUT** Date **12/1/98** Daytime Phone # **561-368-3620**

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (9/98)