

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PS 10/2

CORPORATION  
REINSTATEMENT



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

FILED

02 FEB -1 AM 9:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000029426

1. Corporation Name

Meditech Products of Palm Beach, Inc.

2. Principal Office Address

200 Village Sq. X-ing

Suite, Apt. #, etc.

102

City & State

Palm Beach Gardens, Fl

Zip

33410

Country

USA

3. Mailing Office Address

200 Village Sq. X-ing

Suite, Apt. #, etc.

102

City & State

Palm Beach Gardens, Fl.

Zip

33410

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

65-0995243

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

200004916112--6  
-02/13/02--01082--013  
\*\*\*\*\*300.00 \*\*\*\*\*300.00

7. Name and Address of Current Registered Agent

Name

Eric M. Sauerberg, Esq.

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

200 Village Square Crossing

Suite, Apt. #, Etc.

102

City

Palm Beach Gardens

State

FL

Zip Code

33410

200004916112--6  
-02/13/02--01082--014  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

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

1/17/02

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
D	Sevostianov, Victor	200 Village Square Crossing, Suite 102	Palm Beach Gardens, Fl. 33410
D	Chrpa, Thomas	200 Village Square Crossing, Suite 102	Palm Beach Gardens, Fl. 33410

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-17-02 (561) 3096002

Daytime Phone #

CR2E081 (9/01)

pg 2 of 2

**Thomas Chrpa**  
**200 Village Square Crossing**  
**Suite 102**  
**Palm Beach Gardens, FL 33410**  
**561.309.6002**

January 17, 2002

Via Fedex

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Department of State  
Division of Corporation  
409 East Gaines Street  
Tallahassee, FL 32399

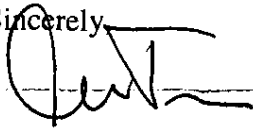
Re: Meditech Products of Palm Beach, Inc.

Dear Sir or Madam:

Please find enclosed the Application for Corporate Reinstatement along with a check made payable to the Department of State in the amount of \$300. Please be advised that we did not receive the Year 2001 Annual Report. Therefore, we did not file such Annual Report and the corporation was administratively dissolved. We respectfully request that you accept the enclosed payment as full consideration for reinstating the corporation.

Please do not hesitate to call me or my attorney, Eric M. Sauerberg (561.776.0330), if you have any questions.

Sincerely,



Thomas Chrpa

cc: Eric M. Sauerberg, Esq.

S:\Chrpa\deptstateletter