

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

**FILED**

02 JAN 28 PM 2:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000038733

**1. Corporation Name**

Palm Beach Patrol, Inc.

**2. Principal Office Address**

9188 Norte Lago Dr.

Suite, Apt. #, etc.

Apt 4 F

City & State

Boca Raton FL

Zip Country

33428 US

**3. Mailing Office Address**

9188 Norte Lago Dr.

Suite, Apt. #, etc.

Apt 4 F

City & State

Boca Raton FL

Zip Country

33428 US

**4. Date Incorporated or Qualified  
To Do Business in Florida**

4/18/00

**5. FEI Number**

65-1079338

**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

Milton Weisberg

300004961653--2

-02/20/02--01064--011

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

9188 Norte Lago Dr

\*\*\*\*150.00 \*\*\*\*150.00

Suite, Apt. #, Etc.

Apt 4 F

300004961653--2

-02/20/02--01064--012

City

Boca Raton

State \*\*\*\*150.00 \*\*\*\*150.00

FL 33428

**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 Milton Weisberg

Date 1/23/02

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
Pres	Milton Weisberg	9188 Norte Lago Dr, #4F	Boca Raton, FL 33428
Vice Pres	Lorraine Weisberg	9188 Norte Lago Dr, #4F	Boca Raton, FL 33428

**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:**

Milton Weisberg  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/23/02  
Date

561-218-9394  
Daytime Phone #

CR2E081 (9/01)