

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR



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

DOCUMENT # P00000113946

1. Corporation Name

CAREERTEL OF FLORIDA, INC.

Principal Place of Business

Mailing Address

1990 NE 163RD STREET
NMB FL 33162

1990 NE 163RD STREET
NMB FL 33162

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/12/2000

5. FEI Number

651 0622 99

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
Pres.	HORBERT B. LAUTMAN	20261 F. COUNTRY CLUB DR	AVONTELA FL 33180
V.P.	DOROTHY LAUTMAN	20261 F. COUNTRY CLUB DR	AVONTELA FL 33180
			400004659254--5 10/30/01--01055--008 ****150.00 ****150.00
			DIUBR 78

8. Name and Address of Current Registered Agent

TOLCHINSKY, LAWRENCE S ESQ
2100 E HALLANDALE BEACH BLVD #200
HALLANDALE BEACH FL 33009

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Lawrence S. Tolchinsky
REGISTERED AGENT MUST SIGN

Date

10/11/01

11. 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:

HORBERT B. LAUTMAN 10/12/01 305-947-7600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/01)

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Careertel of Florida Inc
1990 NE 163rd St.
No. Miami Beach FL 33162

Careertel of Florida, Inc.

October 12, 2001

Division of Corporations
Florida Department of State

To whom it May Concern:

On This date, Oct 12, 2001, we (Careertel of Florida, Inc) received this notice of corporate dissolution

We called the department of corporations and spoke to a miss Diedre in that office. We explained that this was the first notification of any type that we received from your office. If you will take notice the corporation was opened on October 12 2000, but we did not open the office until the end of January. If any notice was sent at that time, we did not receive it. We were then told that further notices were sent to us in either May or June, we did not receive any notices then as well.

Miss Diedre of your office advised us to write this explanation to you and let you know that we did not have any intention of dissolving the corporation or paying the \$150.00 fee at that time.

We are submitting a check for \$150.00 in hopes that you will please accept it and grant us a renewal of our corporation.

Thank you for your prompt attention to this matter, as I am greatly concerned about our corporate status.

Sincerely,



Herber B. Lautman, President
Careertel of Florida, Inc.

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