

Audit No. H04000142996 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # PD1000071412

1. Corporation Name
SEPENUK INVESTMENTS, INC.2. Principal Office Address
100 S.E. 2ND STREET3. Mailing Office Address
100 S.E. 2ND STREETSuite, Apt. #, etc.
17TH FLOOR/SHASuite, Apt. #, etc.
17TH FLOOR/SHACity & State
MIAMI, FLCity & State
MIAMI, FLZip
33131

Country

Zip
33131

Country

REINSTATEMENT

02-04 MRS

4. Date Incorporated or Qualified
To Do Business in Florida 07/19/20015. FEI Number
65-1133268Applied For
Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐\$0.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
ALTMAN, STUART H.Street Address (P.O. Box Number is Not Acceptable)
100 S.E. 2ND STREETSuite, Apt. #, etc.
17TH FLOORCity
MIAMIState
FLZip Code
33131

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

Date 7/9/04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida non-profit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPST	SEPENUK, LAWRENCE	142 HOOVER DRIVE	CRESSKIL, NJ 07626

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)(a), 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:

LAWRENCE SEPENUK
Lawrence Sepenuk President

7/8/04 (917) 685-1960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Audit No. H04000142996 3

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : FOWLER, WHITE, BURNETT, ET AL
Account Number : 071250001512
Phone : (305) 789-9200
Fax Number : (305) 789-9201

CORPORATION REINSTATEMENT

SEPENUK INVESTMENTS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,050.00

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