

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1052

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT 25 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000082336

1. Corporation Name

PROFESSIONAL HEARING OF DELRAY, INC.

Principal Place of Business

4900 LINTON BLVD., SUITE 34
DELRAY BEACH FL 33445

Mailing Address

4900 LINTON BLVD., SUITE 34
DELRAY BEACH FL 33445

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

08/21/2001

5. FEI Number

65-1130963

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	TALMADGE, GLEN R	8562 BRIAN BLVD.	BOYNTON BEACH FL 33437
STD	TALMADGE, CHARLETT R	8562 BRIAN BLVD.	BOYNTON BEACH FL 33437

4000008593444
10/25/02--01058--011 **150.00

8. Name and Address of Current Registered Agent

MERKLE, WILLIAM R
1901 SOUTH CONGRESS AVE., SUITE 120
BOYNTON BEACH FL 33426

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

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

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:

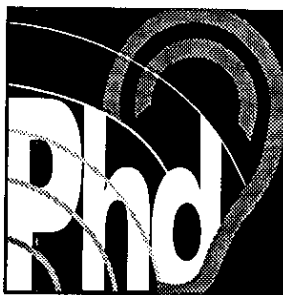
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/23/02 561 638-3009

2 of 2



Professional Hearing of Delray

October 21, 2002

To whom it May Concern:

I recently received in the mail (10/20/2002) a Notice of Revocation. As a new business owner, I was not aware of having to file a Annual Report/Uniform Business Report. Our office has no record of receiving a first or second notice to do so. The reason for this oversight may have something to do with our brief history. Allow me to explain.

I opened Professional Hearing of Delray on September 10th 2001(not so great timing, September 11th was not a good day). Three weeks later unfortunately, our office experienced a fire that destroyed the entire contents inside the building. The fire occurred on Friday evening at around 7:00 p.m. October 5th 2001. My office shares office space with BocaRay Optical. The landlord assured us that reconstruction would only take 2 months. Well, 2 months turned into 7 months. We reopened on May 5th 2002. During this period the ownership of BocaRay Optical changed hands. I personally received no mail or correspondence of any type during our reconstruction period. Perhaps this was when the Annual Report Notices were sent, I truly don't know. This is the first business I have owned and was unaware of any such reporting requirements. I am attaching a check in the amount of \$150.00 to cover the fees involved in owning and operating this business. We apologize for any inconvenience this may have caused and look forward to operating in Florida for many years to come. Please feel free to contact me if you have any questions regarding this matter. My business phone number is (561) 638-3009.

Sincerely,
Glen Talmadge
Owner/President

Professional Hearing of Delray
4900 Linton Blvd. Suite #34
Delray Beach, Florida 33445