

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

# APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 DEC 16 PM 1:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000067397

1. Corporation Name

PROFESSIONAL GROUP HOME, INC.

Principal Place of Business

Mailing Address

16450 NE 7 AVE  
N MIAMI BCH FL 3316216450 NE 7 AVE  
N MIAMI BCH 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 &amp; State

City &amp; State

Zip Country

Zip Country

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director
P	CAMPBELL, DAPHNE	16450 NE 7 AVE

4. Date Incorporated or Qualified To Do Business in Florida

9/2002

5. FEI Number

01-0719849

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐Additional Fee required  
Certificate of Status

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name	Street Address (P.O. Box Number is Not Acceptable)	Suite, Apt. #, Etc.	City
CAMPBELL, DAPHNE	16450 NE 7 AVE		N MIAMI BCH FL 33162

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 607.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10-2-03

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. that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 607.0402, 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)(f). 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

10-2-03

Date

786

27-5027

In # state #

EXP-703 (7/03)

# **PROFESSIONAL GROUP HOME**

**16450 NE 7 Avenue  
North Miami Beach, FL 33162  
Phone: (305) 948-8547**

Florida Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee FL 32314

Dear Sir or Madame:

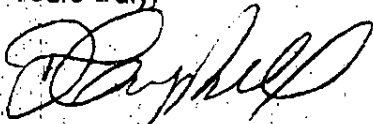
Please be advised that we have sent the Annual Report since January 2003 with the fees of \$150.00 which was cash. It was then noted that we received a letter from you stating that the Annual Report was not filed and that to reinstate the Corporation, we would have to send an additional \$550.00

We did send the amount to reinstate the Corporation of \$550.00 only to find out that the original amount of \$150.00 was cashed.

We have enclosed the Annual Report again so that you can reinstate the Corporation and please the refund the amount of \$550.00 because the original amount was sent in on time.

Thank you for your help.

Yours truly,



Daphne Campbell R.N.

# FAX

Date

12-10-03

Number of pages including cover sheet 3

TO: LYNN HERMAN

Phone

Fax Phone

561-883-0066

FROM:

Peter Swanson, CPA  
GM Financial Group, Inc.  
1191 East Newport Center Drive  
Suite 103  
Deerfield Beach, FL 33442

Phone

954-428-8899 EXT 33

Fax Phone

954-428-6699

**REMARKS:**

☐

*Per Your  
Request*

☐

*For your review*

☐

*Please Reply  
ASAP*

☐

*Urgent*

LYNN,

YOUR RENEWAL NOTICE MUST HAVE BEEN LOST IN MOVE.

PLEASE SIGN LETTER AND FORM AND MAIL TO:

UNIFORM BUSINESS REPORT  
DIVISION OF CORPORATIONS  
PO BOX 1500  
TALLAHASSEE, FL 32302-1500

TOGETHER WITH CHECK FOR \$150.00 PAYABLE TO "FLORIDA DEPT. OF STATE"

LYNNE HERMAN INTERIORS, INC.  
10734 STONEBRIDGE BLVD.  
BOCA RATON, FL 33498

December 10, 2003

Florida Department of State  
Division of Corporations  
PO Box 1500  
Tallahassee, Florida 32302-1500

Dear Sir or Madam:

Enclosed please find a completed Uniform Business Report (UBR) for the 2003 year,  
along with a check for \$150 for the annual fee.


I am enclosing this report late because I never received the original. I suspect that I never  
received it because I moved and now I have a new address.

I downloaded a blank UBR form from the Internet so that I could file and pay our  
obligation timely.

Please know that we take our filing obligation very seriously and that there was no  
disregard of the rules and that we acted in good faith.

Thank you for your attention to this matter. I can be contacted at 561-706-5556 with all  
questions and comments.

Sincerely,



Lynne Herman  
President