

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

05 JUL 11 PM 2:53

DOCUMENT #

PO200011832

1. Corporation Name

HENRY LUIS HELLER, P.A.

W05-31005

2. Principal Office Address

13645 FOLKESTONE COURT P.O. Box 212864

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 212864

Suite, Apt. #, etc.

City & State

WELLINGTON, FL

Zip

33414

Country

USA

City & State

ROYAL PALM BEACH, FL

Zip

33421

Country

USA

REINSTATEMENT

03-05

4. Date Incorporated or Qualified
To Do Business in Florida

10/16/2002

5. FEI Number

✓ 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

KEITH D. KERN, ESQ.

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

50 SE FOURTH AVENUE

Suite, Apt. #, Etc.

City

DELRAY BEACH

State

FL

Zip Code

33483

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

Keith D. Kern

Date 6/24/05

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
P	HENRY LUIS HELLER	13645 FOLKESTONE COURT	WELLINGTON, FL 33414
D	HENRY LUIS HELLER	13645 FOLKESTONE COURT	WELLINGTON, FL 33414

400057662884

07/13/05--01042--004 **450.00

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:

Keith D. Kern

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/5/05

Date

761-723-1925

Daytime Phone #

CR2E081 (01/05)

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2/2

HENRY LUIS HELLER, P.A.
13645 Folkestone Ct.
Wellington, Florida
Tel. No.: (561) 723-1925

June 15, 2005

Via Federal Express

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: Corporation Re-Instatement
Henry Luis Heller, P.A.

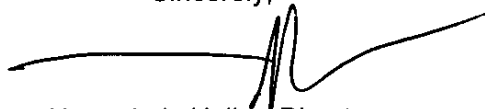
To Whom It May Concern:

I have only recently become aware that the above referenced corporation was administratively dissolved in September of 2003. My corporation is relatively new, so I am not that familiar with the filing process for the corporate status in Florida. I was under the assumption that my accountant handled these types of matters. In addition, the actual annual report was never shown to me by my accountant nor did I receive it at the business mailing address, so I did not even know of the existence of such forms.

I realize that as a savvy business man I should be more familiarized with the corporate filing laws of Florida and do intend to do so; however, at this time I would kindly ask the State to allow me to file an my annual report late and reinstate my corporation. I am enclosing a check for Four Hundred Fifty (\$450.00) Dollars which is the fee for such instances. Please let me know if you need any further documentation.

Your prompt attention and assistance in this matter is greatly appreciated.

Sincerely,



Henry Luis Heller, Director

HLH:
Enclosure(s)