

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000002233

1. Entity Name
DELTEX GROUP INC.



FILED

04 NOV 29 PM 4:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
20283 US 441 SUITE 300
BOCA RATON, FL 33498

Mailing Address
20283 US 441 SUITE 300
BOCA RATON, FL 33498

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



7/8/04 01053 602 \$165.00
11102004 REIN-P CR2E098 (6/04)

4. FEI Number

20-0349113

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KELLERMAN, MICHAEL
20283 US 441 SUITE 300
BOCA RATON, FL 33498

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2005, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSD
KELLERMAN, MICHAEL
20283 US 441 SUITE 300
BOCA RATON, FL 33498 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/22/04 561 982 9444

ARNOLD M. GOTTHILF
Accountant and Tax Consultant

November 23, 2004

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

Re: Michael Kellerman, Inc. formerly Deltex Group, Inc.
P04000002233
DBA WestPointe

Dear Sirs:

I refer you to my recent phone conversation with your office in which we discussed the reinstatement of Deltex Group, Inc..

The Annual Report had been previously filed and the fee of \$150.00 was paid at the same time. The person I spoke with on the phone acknowledged that the referenced fee was received. Your office, I was told during the phone conversation, returned the form because there was a problem about the Employers ID number. It was not received by my client. During the course of our phone conversation I was told that a new form would be mailed to me and we should then refile it with a request to waive the penalty fee. Therefore, we respectfully request that the additional penalty fee be waived and accept the previously paid \$150.00 as payment in full for the annual registration.

Also, enclosed is the Amendment to change the name of the corporation to Michael Kellerman, Inc. with a check for \$35.00.

Also enclosed is an Application for Registration of Fictitious Name to show the DBA as WestPointe. The check for \$60.00 is attached thereto.

Very truly yours,


Arnold M. Gotthilf