


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

192

**DOCUMENT # P04000134811**

1. Entity Name  
**DIALOG INC**



FILED  
05 NOV -9 PM 4:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**3032 E. COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33308 US**

Mailing Address  
**3032 E. COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33308 US**

2. Principal Place of Business  
**10569 N.W. 53 STREET**

3. Mailing Address  
**10569 N.W. 53 ST**

Suite, Apt. #, etc.

City & State  
**SUNRISE, FL**

City & State  
**SUNRISE, FL**

Zip  
**33351**

Country  
**USA**

Zip  
**33351**

Country  
**USA**

11072005 REIN-P CR2E098 (6/04)

4. FEI Number ☒ Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**GHEORGHU, PAUL C  
3032 E COMMERCIAL BLVD.  
FORT LAUDERDALE, FL 33308**

7. Name and Address of New Registered Agent

Name **RONALD A. LUZIM, ESQ**

Street Address (P.O. Box Number is Not Acceptable)  
**4900 W. SAMPLE RD**

Suite, Apt. #, etc.  
**SUITE 400**

City **CORAL SPRINGS** FL Zip Code **33065**

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 ☒ **11/7/05**  
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, 2006, Fee will be \$900.00**

**REINSTATEMENT** **051107**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GHEORGHU, PAUL C 3032 E COMMERCIAL BLVD. FORT LAUDERDALE, FL 33308	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT CLAUDE SIMPSON 10569 N.W. 53 STREET SUNRISE, FL 33351	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500061303925 11/09/05--01062--012 **\$8.75	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500061303925 11/09/05--01062--011 **\$700.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: **CLAUDE SIMPSON, PRESIDENT**  
Signature and typed or printed name of signing officer or director

**11/7/05** **954-755-1509**  
Date Daytime Phone #

282

LAW OFFICES OF

**LUZIM & SLATKIN**

9900 WEST SAMPLE ROAD, SUITE 400  
CORAL SPRINGS, FLORIDA 33065

TEL: (954) 755-1500

FAX: (954) 757-9175

**RONALD A. LUZIM, P.A.**

Certified Family & Circuit Court Mediator  
Member of New York & Florida Bars  
**Luzimlaw@AOL.com**

**SHELDON T. SLATKIN, P.A.**

Member of Florida Bar  
**Slatkin@ATTGLOBAL.net**

November 7, 2005

Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301


Re: Dialog Inc.  
Document No. P04000134811

Dear Sir or Madam:

Enclosed herein please find the Reinstatement for the above referenced corporation along with our check in the amount of \$758.75 representing the reinstatement fee of \$750.00 and the fee for the Certificate of Good Standing. Please mail same to the undersigned upon filing.

Should you have any questions, we would appreciate your contacting us.

Sincerely,



Robin Gordon  
Legal Assistant

RG / mlv  
enclosures