

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 DEC -3 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *P17246*

1. Corporation Name

Property-Casulty Company of MCA

300009343793
12/04/02--01023--006 ***500.00

2. Principal Office Address

5 Marine View Plaza

Suite, Apt. #, etc.

Suite 201

City & State

Hoboken, New Jersey

Zip

07030

Country

USA

3. Mailing Office Address

5 Marine View Plaza

Suite, Apt. #, etc.

Suite 201

City & State

Hoboken, New Jersey

Zip

07030

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

Qualified 12-16-87

5. FEI Number

22-3208467

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

Joseph H. Lowe, Esq. Stephens, Lynn, Klein & McNicholas, P.A.

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

9130 South Dadeland Boulevard

Suite, Apt. #, Etc.

Two Datan Center, Phase H

City

Miami

State
FL

Zip Code

33156

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

REGISTERED AGENT MUST SIGN

Date

11/1/02

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	Martin Beitler	1225 River Road	Edgewater, NJ 07020
VP	Edward Mallozzi	76 The Glen	Glen Head, NY 11545-2254
S	James M. Gartland	413 Caton Avenue	Brooklyn, NY 11218-1703

REINSTATEMENT *99-02*

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:

James M. Gartland Secretary - Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/02/02 (201) 714-9595 x104

Daytime Phone #

T. Lewis 12/3/02

CR2E081 (9/01)