

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 NOV 17 PM 0:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P25483**

1. Corporation Name

BRCMC, INC.

Principal Place of Business

WOODLAND FALLS CORPORATE PARK.
210 LAKE DR., EAST, SUITE 200
CHERRY HILL NJ 08002

Mailing Address

WOODLAND FALLS CORPORATE PARK.
210 LAKE DR., EAST, SUITE 200
CHERRY HILL NJ 08002

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Blank Rome Comisky & McCauley

Suite, Apt. #, etc.

1200 N. Federal Hwy., #309

City & State

Boca Raton, Florida

Zip

33432

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/02/1989

5. FEI Number

22-2981580

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ **\$8.75 Additional Fee required
for a Certificate of Status**

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	RUTTENBERG, A. FRED	210 LAKE DR. E. #200	CHERRY HILL NJ
VPD	MORA, ABRAHAM M. Michael H. Leeds	1401 FORUM WAY 1200 N. Federal Hwy., #309	WEST PALM BEACH FL Boca Raton, FL 33432
STD	WEINSTEIN, STEVEN D.	210 LAKE DR. E. #200	CHERRY HILL NJ

REINSTATEMENT

600002352425-1

11/19/97-01103-008

******750.00 ****750.00**

8. Name and Address of Current Registered Agent

~~MORA, ABRAHAM M.~~
~~1401 FORUM WAY~~
~~WEST PALM BEACH FL 33401~~

9. Name and Address of New Registered Agent

Name

Michael H. Leeds

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

1200 N. Federal Highway

Suite, Apt. #, Etc.

Suite 309

City

Boca Raton,

State

FL

Zip Code

33432

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.

Signature of
Registered Agent

Michael H. Leeds
REGISTERED AGENT MUST SIGN

Date **11/11/97**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on Intangible tax.)

12. 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:

Michael H. Leeds
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/11/97 561-417-8100
Date Daytime Phone #