

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

96 DEC 24 AM 9:39

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P30493

1. Corporation Name

WORLD EDUCATION, INC.

Principal Place of Business

210 LINCOLN STREET
BOSTON MA 02111

Mailing Address

210 LINCOLN STREET
BOSTON MA 02111

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

2. New Principal Office Address, If Applicable
World Education, Inc.

3. New Mailing Office Address, If Applicable
World Education, Inc.

Suite, Apt. #, etc.
44 Farnsworth St.

Suite, Apt. #, etc.
44 Farnsworth St.

City & State
Boston, MA

City & State
Boston, MA

Zip
02210

Country

Zip
02210

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/01/1990

5. FEI Number

13-1804349

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	LAMSTEIN, JOEL H.	210 LINCOLN ST 44 Farnsworth St.	BOSTON MA
V	COMINGS, JOHN P.	210 LINCOLN ST 44 Farnsworth St.	BOSTON MA
S <input checked="" type="checkbox"/>	MAYO-SMITH, RICHOMND	210 LINCOLN ST 44 Farnsworth St.	BOSTON MA
T <input checked="" type="checkbox"/>	GOLDBERG, LELAND B	210 LINCOLN ST 44 Farnsworth St.	BOSTON MA 02210
C <input checked="" type="checkbox"/>	LEVY, GERALD DUN	210 LINCOLN ST 44 Farnsworth St.	NEW YORK NY

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8. Name and Address of Current Registered Agent

BROWN, STACY DANIEL
110 SHEPHERD TRAIL
LONGWOOD FL 32752-9832

9. Name and Address of New Registered Agent

Name
Jon Silverstone
Street Address (P.O. Box Number is Not Acceptable)
28605 SW 172 St.
Suite, Apt. #, Etc.

City
Holmstead

State
FL

Zip Code
33030

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

Jon Silverstone

REGISTERED AGENT MUST SIGN

Date

10/22/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

Joe H. [Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/22/96

Date

Daytime Phone #

617-482-9485