

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



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

02 OCT 29 AM 11:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000000336

1. Corporation Name

WALL & COMPANY, INC

2. Principal Office Address

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

400 GOLDEN ISLE DR UNIT 59

400 GOLDEN ISLE DR UNIT 59

City & State

City & State

HALLANDALE, FL

HALLANDALE, FL

Zip

Country

Zip

Country

33009

33009

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

Applied For

13-5564601

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

PHYSIL BUIRSKI

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

400 GOLDEN ISLE DR UNIT 59

Suite, Apt. #, Etc.

City

HALLANDALE

State

FL

Zip Code

33009

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

Physil Buirski

REGISTERED AGENT MUST SIGN

Date

10/25/02

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
PS	PHYSIL BUIRSKI	400 GOLDEN ISLE DR UNIT 59	HALLANDALE, FL 33009

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:

Physil Buirski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/25/02

Daytime Phone #

CR2E081 (9/01)

js 11/1/02

WALL & COMPANY, Inc.

400 Golden Isle Drive Unit 59
Hallandale, Florida 33009

October 25, 2002

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

Re: Reinstate corporation

Dear Madam or Sir:

It has recently come to my attention that Wall & Company, Inc. has been administratively dissolved by the State of Florida. I do hereby request that Wall & Company, Inc. be reinstated due to reasonable cause.

First, I am 94 years of age, the president and director of Wall and Company Inc. My wife of 65 years became very ill in 2001. I had to take her to doctors and see that her needs were met. She passed away on June 13, 2002. In addition, I did not receive the 2002 Uniform Business Report. I can assure you that had I received this report that it would have been timely filed.

As a result, I do hereby request that you reinstate Wall and Company and waive the penalty of \$600.00 due to reasonable cause. Please find enclosed an application for reinstatement along with a check in the amount of \$158.75 which includes the additional fee of \$8.75 for a certificate of status.

Sincerely,


Phyll Buirski