

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAY -2 AM 9:09

SECRET
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

Thomas G. Schultz, P.A.
Document Number: P93000008696

500055329115
25/05--01038--019 **758.75

REINSTATEMENT

01-05-2005

2. Principal Office Address

201 S. Biscayne Blvd.

3. Mailing Office Address

201 S. Biscayne Blvd.

Suite, Apt. #, etc.

34th Floor

Suite, Apt. #, etc.

34th Floor

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33131

Country

US

Zip

33131

Country

US

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

02/04/1993

5. FEI Number

650386882

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

Thomas G. Schultz

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

201 S. Biscayne Blvd.

Suite, Apt. #, Etc.

34th Floor

City

Miami

State

FL

Zip Code

33131

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

Thomas G. Schultz

REGISTERED AGENT MUST SIGN

Date April 22, 2005

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
PSTD	Thomas G. Schultz	201 S. Biscayne Blvd., 34th Floor	Miami, Florida 33131

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas G. Schultz

April 22, 2005

Date

(305) 371-8585

Daytime Phone #

CR2E081 (01/05)

FERRELL SCHULTZ

Ferrell Schultz & Fertel
A PROFESSIONAL ASSOCIATION

PO Box 01-9693
201 South Biscayne Boulevard
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Miami, Florida 33131-4325

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MIAMI, FLORIDA
NEW YORK, NEW YORK
SAO PAULO, BRAZIL
MEXICO CITY, MEXICO
BUENOS AIRES, ARGENTINA
CARACAS, VENEZUELA

April 22, 2005

VIA U.S. MAIL

Department of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: Thomas G. Schultz, P.A. Reinstatement


Dear Sir or Madam:

Enclosed is a Corporation Reinstatement for Thomas G. Schultz, P.A. and a check in the amount of \$758.75 for reinstatement for years 2001 through 2005 and for a certified copy. Thomas G. Schultz, P.A. did not receive notice from the Florida Dept. of State ("State") since 2001 due to an error on the State's part (see attached). As such, the State has indicated that the \$600 penalty will be waived.

If you have any questions, please do not hesitate to call.

Sincerely,

Ferrell Schultz & Fertel, PA


Nadine Torres,
Legal Assistant

Encls.