

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR -8 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000011680**

1. Corporation Name

Rebecca S. Rosenthal, P.A.

REINSTATEMENT 03-04

800030025838

03/08/04--01050--008 **300.00

2. Principal Office Address

1133 Old Okeechobee Road

Suite, Apt. #, etc.

3. Mailing Office Address

1133 Old Okeechobee Road

Suite, Apt. #, etc.

City & State

West Palm Beach FL

City & State

West Palm Beach

Zip

33401

Country

USA

Zip

33401

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

2/4/93

5. FEI Number

65-0393516

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

Rebecca S. Rosenthal

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

1133 Old Okeechobee Road

Suite, Apt. #, Etc.

City

West Palm Beach

State

FL

Zip Code

33401

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

Rebecca S. Rosenthal

REGISTERED AGENT MUST SIGN

Date

3/1/04

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.D. | Rebecca S. Rosenthal | 1133 Old Okeechobee Road | West Palm Beach FL 33401 |
| | | | |
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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: **Rebecca S. Rosenthal President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rebecca S. Rosenthal, President

3/1/04

Date

(561) 865-1985

Daytime Phone #

CR2E081 (01/04)

5

Rebecca S. Rosenthal, P.A.

2672

1133 Old Okeechobee Road
West Palm Beach, Florida 33401
Phone/Fax: 561-865-1985

VIA OVERNIGHT MAIL

March 1, 2004

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

RE: Reinstatement of Rebecca S. Rosenthal, P.A.

To Whom It May Concern:

Pursuant to instructions received from Tina over the phone for reinstating the above-referenced corporation, I am enclosing the following:

1. Completed form for Florida corporation reinstatement
2. My firm's check number 106 in the sum of \$300.00 for annual report filings for 2003 and 2004

Kindly reinstate my corporation as soon as is possible. Thank you for your assistance in handling this matter expeditiously.

Sincerely,



Rebecca S. Rosenthal, Esq.

Enclosures: Form and check