

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 FEB -9 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000025945

1. Corporation Name

ABACUS ZED GROUP, INC.

2. Principal Office Address

2174 BELCREST CIRCLE

Suite, Apt. #, etc.

3. Mailing Office Address

2174 BELCREST CIRCLE

Suite, Apt. #, etc.

City & State

ROYAL PALM BEACH, FL

City & State

ROYAL PALM BEACH, FL

Zip

33441

Country

USA

Zip

33441

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida 4-5-93

5. FEI Number
65-0402979

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

STEVEN YANKERS

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

2174

Suite, Apt. #, Etc.

BELCREST CIRCLE

City

ROYAL PALM BEACH

State

FL

Zip Code

33441

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

Date

REGISTERED AGENT MUST SIGN

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
PD	STEVEN YANKERS	2174 BELCREST CIRCLE	ROYAL PALM BEACH, FL 33441
ST	JOSEPHINE YANKERS	2174 BELCREST CIRCLE	ROYAL PALM BEACH, FL 33441

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

1-9-04

Date

561-333-0113

Daytime Phone #

CR2E081 (01/04)

**ABACUS ZED GROUP, INC.
2174 BELLCREST CIRCLE
ROYAL PALM BEACH, FL 33441**

January 9, 2004

Uniform Business Report
Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

**RE: ABACUS ZED GROUP, INC.
FEIN# 65-0402979**

Dear Sir or Madam:

Enclosed please find a Uniform Business Form for Abacus Zed Group, Inc. The company never received the UBR Form for 2003. I called your office to discuss this problem. Pursuant to that conversation I am respectfully asking for an abatement of penalties. Also please find enclosed a check in the amount of \$ 150 for the year 2003.

I want to thank you for all of the help that was given to me. If you have any questions, please contact me at the above address.

Very Truly Yours,


Steven Yankers

enclosed
Ww/ubr/ UBR LTR 2004 Abacus Zed Group