

PLEASE READ ALL INSTRUCTIONS BEFORE C

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Dec 22 1999 8:00 am
Secretary of State

DOCUMENT # P930000 74975

1. Corporation Name

FOUR THOUSAND FEDERAL CORP.

Principal Place of Business

Mailing Address

3326 N.E. 33RD ST.
FT. LAUD, FLA 33308

P.O. BOX 418
DEERFIELD BEACH, FL
33443

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

REINSTATEMENT 98-99

2. New Principal Office Address, If Applicable

4000 N. FEDERAL HWY
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. BOX
418
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0443684

Applied For
Not Applicable

City & State

FT. LAUD, FLA

City & State

Deerfield Beach, FL

Zip

33306

Country

Broward

Zip

33443

Country

Broward

CERTIFICATE OF STATUS DESIRED

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PT, D	MICHAEL GAGLIARDI	4000 N. FEDERAL HWY	FT. LAUD, FL 33306
SD	DAVID PISTOSIO	4000 N. FEDERAL HWY	FT. LAUD, FL 33306
			LS
			100003087881--2
			-01/04/00--01081--005
			****900.00 ****900.00

8. Name and Address of Current Registered Agent

DAVID PISTOSIO
4000 N. FEDERAL HWY
FT. LAUD, FLA 33306

9. Name and Address of New Registered Agent

Name MICHAEL GAGLIARDI
Street Address (P.O. Box Number is Not Acceptable)
3326 N.E. 33RD ST
Suite, Apt. #, Etc.
FL. LAUD, FLA
City
State FL Zip Code 33308

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

REGISTERED AGENT MUST SIGN

Date

12-7-99

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-7-99