### PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR REINSTATEMENT



# FLORIDA DEPARTMENT, OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS

### DOCUMENT #

1. Corporation Name

P940000 10 004

Valentino Boutique Palm Beach, Inc.

Mailing Address

204 Worth Avenue Palm Beach, FL

Principal Place of Business

CSC-The United States Corp. Company 375 Hudson Street, 11th Floor New York, NY 10014-3686 FILED

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SEGRETARY OF STATE TALLAHASSEE, FLORIDA

If above a	334 ddresses a	re incorrect in any way, line thre			n and enter co	rrection belo	w.		ì						
New Principal Office Address, If Applicable     3. New M				iling Office Address, If Applicable Madison Avenue				Date Incorporated or Qualified     To Do Business in Florida February 8, 1994							
2				Suite, Apt. #, etc. 25th Floor				5. FEI Number						Applied For	
City & State	·		New York, New Yo					13=3810054 Not Application							
Zip Country						S.A.			CERTIFICATE	OF STA	TUS DESIRE	D L =			
7. Names a	and Street	Addresses of Each Officer and/	or Director (Flo	rida nonț	profit corporation	ons must fist	at lea	ast 3	directors)						
Title(s) 1 Name of Officers and/or Directors				Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box N				r			City / State / Zip				
xec VP					Madison	Ave	25	th	Floor	New	York,	New	York	10022	
ec. irecto res.,	irector res., Georges Wichner				Madison				_		York,			10022	
Asst. Treas. Wayne Markowitz				600	Madison	Ave.,	25	th	Floor	New	York,	<u>N</u> ew	York	10022	
Direc. Ass. S	ec. A	ndrew Tunick		600	Madison	Ave.,	25	th	Floor	New	York,	New	York	10022	
	8. N	ame and Address of Current	Registered Age	ent		Name		9.	. Name and A	Address	of New Re	egistere	d Agent		
Corporation Service Company						Street Address (P.O. Box Number is Not Acceptable)									
1201 Hays Street Tallahassee, Florida 32301						Suite, Apt. #, Etc.									
					<u> </u>	City State Zip Code						ode			
10. I, being	appointed	the registered agent of the abo	ove named corpo	oration, a	ım familiar with						0505, F.S.	, j		09	
Signature o Registered		Kawa K	. Du	W.		⊷—As	ास । १२ <del>१</del> -	κ. ₩	Dunlap Pres	Date	_ / _	2/0	<u> 24(</u>	<u> 7. /</u>	

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 filling 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 in a semination indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Yes No 🛛

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11. This corporation owes the current year

Intangible Personal Property Tax due June 30.

12/4/90

212 3550051

Daytime Phone #

(See other side for information

on intangible tax.)



ACCOUNT NO. : 072100000032

REFERENCE : 528019

4301770

AUTHORIZATION :

COST LIMIT : \$ 750.00

Patricia Pyrit

ORDER DATE: December 23, 1999

ORDER TIME : 11:40 AM

ORDER NO. : 528019-005

CUSTOMER NO: 4301770

CUSTOMER: Kathy Mccomb, Paralegal

Patterson, Belknap, Webb & 1133 Avenue Of The Americas

23rd Floor

New York, NY 10036-6710

#### DOMESTIC FILINGS

NAME:

VALENTINO BOUTIQUE PALM

BEACH, INC.

XX\_\_\_ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson

EXAMINER'S INITIALS

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