

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
**971111**  
 FLORIDA DEPARTMENT OF STATE  
 Sandra B. Morham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **P94000032216**

1. Corporation Name  
**SALON SCIENCES, CORPORATION**

Principal Place of Business  
 2139 UNIVERSITY DR.  
 SUITE 1000  
 CORAL SPRINGS FL 33071

Mailing Address  
 2139 UNIVERSITY DR.  
 SUITE 1000  
 CORAL SPRINGS FL 33071

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

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**FILED**

97 JUL -1 AM 11:52

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified To Do Business in Florida

04/28/1994

5. FEI Number

65-0485350

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

SB 75 Additional Fee required for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	BANDELL, RENEE F (married 11/19/96) GOLDSTEIN, RENEE F	2139 UNIVERSITY DR., SUITE 1000	CORAL SPRINGS FL 33071
D	BANDELL, DAVID A	2139 UNIVERSITY DR., SUITE 1000	CORAL SPRINGS FL 33071

4000002231544--0  
 -07/07/97--01133--002  
 \*\*\*165.00 \*\*\*165.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GOLDSTEIN, RENEE F (Married 11/19/96)  
 BANDELL, RENEE F  
 2139 UNIVERSITY DR.  
 SUITE 1000  
 CORAL SPRINGS FL 33071

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 Suite, Apt. #, Etc.  
 City  
 State FL Zip Code

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 RENEE F. GOLDSTEIN

*Renee Goldstein*

Date JUNE 27, 1997

REGISTERED AGENT MUST SIGN

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐

(See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information on intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *Renee Goldstein* RENEE F. GOLDSTEIN 6/27/97 (954) 523-8050

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2012



June 27, 1997

**FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
FILING SECTION  
P.O. Box 6327  
Tallahassee, Florida 32314**

**RE: SALON SCIENCES CORPORATION - FEIN: 65-0485350  
DATE OF INCORPORATION: 4/28/94**

**To whom it may concern:**

Enclosed is our check for \$165.00 representing the Corporate Annual Report Filing Fee. Please be advised that we did not receive a current form from your office. As per our telephone conversation with your division on June 17, 1997, we have completed an "Application For Reinstatement" form which will show all of our current company data. As per our note on the form, please change your records to reflect my change of name due to marriage.

As we did not receive these forms, we were not aware of the filing deadline. Therefore, we respectfully request that the penalty for late filing be waived.

If you have any questions or require any additional information, please contact me at (954) 523-8050.

Thank you for your understanding and cooperation.

Very truly yours,  
**SALON SCIENCES CORPORATION**

**Renee F. Goldstein**  
President

RFG/mbb

enclosures



2139 University Drive Coral Springs, Florida 33071 (305) 345-3777 FAX (305) 345-3774