

APPLICATION
FOR
REINSTATEMENT



96-98
A/R

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATION

p94000057050

MALLORCA PEARLS LTD, Inc

Mailing Address

2960 N.W. BOCA RATON BLVD 1734 DEL HAVEN DR
BOCA RATON, FL 33431 DELRAY BEACH, FL 33483

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Country

Country

8/29/94

65-0508964

6. CERTIFICATE OF STATUS DESIRED

**\$8.75 Additional Fee required
for a Certificate of Status**

[illegible]

9. Name and Address of New Registered Agent

EUGENE J. SADOWSKI
500 N.E. SPANISH RIVER BLVD #20A
DOCA RATON, FL 33431

Name _____

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

Suite, Apt. #, Etc.

City

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

REGISTERED AGENT MUST SIGN

Date _____

11. This corporation owes or has paid 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:

Charlotte Barrow Charlotte Barrow 9/15/98 (561) 272-6060

Date _____

Daytime Phone # _____

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