

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000070869**

1. Corporation Name

ESTINATIONS OF DISTINCTION, INC.

FILED

97 NOV 12 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

3200 N MILITARY TRAIL
STE 400
BOCA RATON FL 33431
US

Mailing Address

3200 N MILITARY TRAIL
STE 400
BOCA RATON FL 33431
US



REINSTATEMENT **97**

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

2. New Principal Office Address, if Applicable

Suite, Apt., etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt., etc.

City & State

Zip

Country

4. Date incorporated or Qualified
To Do Business in Florida

09/27/1994

5. FID Number

NOT APPLICABLE

(Applies for

Not Applicable)

6. CERTIFICATE OF STATUS DESIRED ☐

\$6.75 Additional Fee required
for a Certificate of Status

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

Title(s)	Name of Officer and/or Director	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City, State, Zip
P	BUSSE, DIANE Toffler	3200 N MILITARY TRAIL, #400	BOCA RATON FL 33431
D	TOFFLER, JEFFREY	3200 N MILITARY TRAIL	BOCA RATON FL 33431

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****750.00 ****750.00

8. Name and Address of Current Registered Agent

APPLEBYUM, STANLEY D
86 HAMPSHIRE LN
BOYNTON BEACH FL 33436

9. Name and Address of New Registered Agent

Capital Connection, Inc.
417 E. Virginia Suite 4
Tallahassee
FL 32301

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0665, F.S.

Signature of
Registered Agent

Diane Roberts

REGISTERED AGENT MUST SIGN

Date

11/12/97

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 of the corporation or trustee empowered to execute this application as provided for in chapters 607 or 617, F.S. I further certify that upon filing this reinstatement application, the reason for dissolution has been corrected, the corporate name satisfies the requirements of Section 607.0461 or 617.0461, 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(2)(b), F.S. The information furnished on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Diane Roberts

Diane Toffler

11/6/97 (561)241-7474