

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

FILED

03 FEB -3 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000003551

1. Corporation Name

HARVEY A. NUSSBAUM, P.A.

800011626608
02/03/03--01097--021 **450.00

2. Principal Office Address

2000 GLADES ROAD

Suite, Apt. #, etc.

SUITE 110

City & State

BOCA RATON, FL

Zip

33431

Country

USA

3. Mailing Office Address

2000 GLADES ROAD

Suite, Apt. #, etc.

SUITE 110

City & State

BOCA RATON, FL

Zip

33431

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

1/10/1995

5. FEI Number

65-0547259

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

HARVEY A. NUSSBAUM

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

2000 GLADES RD.

Suite, Apt. #, Etc.

STE 110

City

BOCA RATON

State

FL

Zip Code

33431

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

1/28/03

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P, D	HARVEY A. NUSSBAUM	2000 GLADES RD. , STE 110	BOCA RATON, FL 33431

10. 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

HARVEY A. NUSSBAUM, PRES

Date

561 338-0733

Daytime Phone #

2012



GOLDSTEIN LEWIN & CO.

Certified Public Accountants and Consultants

January 6, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Harvey A. Nussbaum, P.A.
Document #: P95000003551

Dear Sir or Madam:

Please be advised that I am the accountant for the above referenced company and am enclosing an application for Corporate Reinstatement together with a check for \$450, representing the annual fees due for 2001, 2002 and 2003.

The company never received their pre-printed annual business reports for 2001 and 2002 and therefore did not file those reports. Upon preparing the enclosed reinstatement application, I viewed a document image of the last filed annual report, and noticed that the Department of State reflects the company's zip code as 33486 when it should be 33431. This must be the reason why the company did not receive their pre-printed annual reports for 2001 and 2002.

Since the company did not receive their annual report packages for 2001 and 2002, and since the company has timely filed all prior annual reports since date of incorporation, we respectfully request that you abate the reinstatement fee of \$600.

Sincerely,

GOLDSTEIN LEWIN & CO.
Certified Public Accountants and Consultants

Robert C. Zeigen, CPA
For the firm

*If the \$450 reinstatement
check is not accepted as payment
in full, please return the check.
Thank you.*

F:\GLC data files\Clients\6200034\corporate reinstatement.doc