


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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

FILED
01 SEP 12 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000018663

1. Corporation Name

CELTECH INDUSTRIES INC.

Principal Place of Business

43 E CARL ST
HICKSVILLE NY 11801
US

Mailing Address

2001 GROVE ST
WANTAGH NY 11793
US

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

2. New Principal Office Address, If Applicable

P.O. Box 811174

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

Zip

33481

Country

US

Zip

Country

REINSTATEMENT 98-01

4. Date Incorporated or Qualified
To Do Business in Florida

03/07/1995

5. FEI Number

65-0563525

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 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	ROCHMAN, MIRIAM	9188 WEST ATLANTIC BLVD.	CORAL SPRINGS FL 33071
D	ROCHMAN, JERRY	6695 N.W. 23 TERRACE	BOCA RATON FL 33496

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***1200.00 ***1200.00

8. Name and Address of Current Registered Agent

ROCHMAN, MIRIAM
6695 N.W. 23 TERRACE
BOCA RATON FL 33496

9. Name and Address of New Registered Agent

Name

ROCHMAN, JERRY

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

6695 N.W. 23 TERRACE

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33496

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 9/7/01

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/7/01
Date

(561) 241-1421
Daytime Phone #