

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 # P95000040165

1. Corporation Name

UNIVERSAL PC SYSTEMS, INC.

Principal Place of Business

4550 LAKE WORTH ROAD
LAKE WORTH FL 33463
US

Mailing Address

4550 LAKE WORTH ROAD
LAKE WORTH FL 33463
US

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

REINSTATEMENT 97

4. Date Incorporated or Qualified
To Do Business in Florida

05/22/1995

5. FEI Number

65-0582722

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	GALLO, MIGUEL A	4550 LAKE WORTH ROAD	LAKE WORTH FL 33463
C	GALLO, MARVIN	4550 LAKE WORTH ROAD	LAKE WORTH FL
V	Gallo, Maria	4550 Lake Worth Road	Lake Worth, FL 33463
			500002367355--6
			12/09/97--01099--023
			***750.00 ***750.00

8. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name

Gallo, Miguel A

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

4550 Lake Worth Road

Suite, Apt. #, Etc.

City

Lake Worth

State

FL

Zip Code

33463

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

Miguel Gallo

REGISTERED AGENT MUST SIGN

Date 10-25-97

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 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:

Miguel Gallo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-25-97 (561) 968-4488

Daytime Phone #

CR2ED40 (8/97)