

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 #

1. Corporation Name

MODELLISTA DE EUROPA (CORP.)

Principal Place of Business

6850 E1 Viento Way
Boca Raton, Florida
33433

Mailing Address

6850 E1 Viento Way
Boca Raton, Florida
33433

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

2. New Principal Office Address, If Applicable

6850 E1 Viento Way

Suite, Apt. #, etc.

City & State

Boca Raton, Florida

Zip

33433

Country

U.S.A.

3. New Mailing Office Address, If Applicable

6850 E1 Viento Way

Suite, Apt. #, etc.

City & State

Boca Raton, Florida

Zip

33433

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

5/22/1995

5. FEI Number

65-0588908

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
PTD	Jerome A. Finkelstein	431 E. Palisade Avenue	Englewood, New Jersey 07631
VSD	Ethel M. Finkelstein	431 E. Palisade Avenue	Englewood, New Jersey 07631

8. Name and Address of Current Registered Agent

Louis Leibovit
350 Royal Palm Way
Palm Beach, Florida 33480

9. Name and Address of New Registered Agent

Name
Bruce F. Silver, Esquire
Street Address (P.O. Box Number is Not Acceptable)
6100 Glades Road
Suite, Apt. #, Etc.
Suite 201
City
Boca Raton
State
FL
Zip Code
33434

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

Bruce F. Silver

REGISTERED AGENT MUST SIGN

Date

9-1-98

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:

Jerome A. Finkelstein

Jerome A. Finkelstein, as President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #