

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

AND  
FILED

1997 NOV 10 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000043268

1. Corporation Name

ARY KRAU MD, P.A.

Principal Place of Business

~~7330 S.W. 62ND PL.~~  
~~SUITE 400~~  
~~MIAMI FL 33143~~

Mailing Address

7330 S.W. 62ND PL.  
SUITE 400  
MIAMI FL 33143



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

2. New Principal Office Address, if Applicable

1143 Kane Concourse  
Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable

1143 Kane Concourse  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

06/06/1995

5. FEI Number

65-0585263

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	KRAU, ARY	<del>7330 S.W. 62ND PL., #400</del> 1143 Kane Concourse	MIAMI FL 33143 Bay Harbor Islands, FL 33154

200002346242--5  
-11/13/97--01053--016  
\*\*\*\*165.00 \*\*\*\*165.00

8. Name and Address of Current Registered Agent

KRAU, ARY  
7330 S.W. 62ND PL.  
SUITE 400  
MIAMI FL 33143

Krau, Ary  
1143 Kane Concourse  
Bay Harbor, FL  
33154

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

*Ary Krau*

REGISTERED AGENT MUST SIGN

Date 11/4/97

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:

*Ary Krau*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/4/97

Daytime Phone #

305-861-6881

CR2E040 (8/97)

ARY KRAU, M.D., P.A.  
PLASTIC AND RECONSTRUCTIVE SURGERY  
1143 KANE CONCOURSE  
BAY HARBOR ISLANDS, FLORIDA 33154

TELEPHONE  
(305) 861-6881

FAX  
(305) 861-8858

Division of Corporations  
Annual Report/Reinstatement Section  
PO Box 6327  
Tallahassee, FL 32314-6327

November 4, 1997

To Whom This May Concern:

I am writing this letter to inform you that receipt of a renewal application for my corporation never reached my new address. Early 1997, I moved my offices to 1143 Kane Concourse, Bay Harbor Islands, Florida 33154. Much of my mail was never received. This is only the second year that I am a corporation and I was unaware that I needed to contact your office with a change of address. I never received any correspondence from your office until I received the dissolution certificate. I am enclosing a check for \$165.00 for renewal fees and I am asking you to please consider these circumstances and reinstate my corporation.

If there is any additional information I can provide your office with please contact me at the above address and telephone number.

Thank you for your consideration.

  
Ary Krau, M.D.