PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 OCT 19 AM 11:31
SECRETARY OF STATE
TALLAHASSEE FLORIDA

2001 USR

DOCUMENT # **P95000048908**

1. Corporation Name

RUSSECK FINE ART GROUP, INC.

Principal Place of Business	Mailing Address
203 WORTH AVENUE PALM BEACH FL 33480	203 WORTH AVENUE PALM BEACH FL 33480

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

4. Date Incorporated or Qualified To Do Business in Florida: 06/22/1995

5. FEI Number: 65-0628442 ☐ 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	4 City / State / Zip
D	RUSSECK, HOWARD	1125 WOODMONT RD.	GLADWYNE PA 19035
VP	RUSSECK, SLOANE	6055 BOCA COLONY DRIVE	BOCA RATON FL 33433

300004668893--0
-11/06/01--01046--019
****150.00 ****150.00

8. Name and Address of Current Registered Agent

RUSSECK, SLOANE
203 WORTH AVE
PALM BEACH FL 33480

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

CR2E040 (8/01)

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 Date: 10-17-01
REGISTERED AGENT MUST SIGN

11. 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 SLOANE RUSSECK 10-17-01 561-832-4811
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

2 of 2

RUSSECK GALLERY
203 WORTH AVENUE
PALM BEACH, FL 33480

Division of Corporations
Annual Report/Reinstatement section
P.O. Box 6327
Tallahassee, FL 32314-6327

October 17, 2001

To Whom It May Concern,

We have recently received a letter stated that we have failed to file our 2001 corporation annual report/uniform business report in accordance with Florida Statutes.

I am writing this letter to state that we never received the initial letter from Florida Dept of Corporations or any letter after that regarding this information.

I have checked our files thoroughly and have not found any record of receiving this information. Our bookkeeping dept. pays invoices, bills etc. as soon as they come in and they did not receive a form from the division of corporations.

I am enclosing a check for $150 and I would appreciate if you could take this matter in to consideration.

Your cooperation is greatly appreciated,

Sloane Russeck

TELEPHONE (561) 832-4811
FACSIMILE (561) 832-4813