

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

03 APR -8 AM 7:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P95000085634

**1. Corporation Name**

A & B SALES CORP. OF PALM BEACH, INC.

**2. Principal Office Address**

12189 N US Hwy One

Suite, Apt. #, etc.  
48

**City & State**

North Palm Beach, FL

**Zip**

33408

**Country**

USA

**3. Mailing Office Address**

2187 Marseille Dr

Suite, Apt. #, etc.

**City & State**

Palm Beach Gardens, FL

**Zip**

33410-1279

**Country**

USA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

11/7/95

**5. FEI Number**

65-0627530

**Applied For**

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☒

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

**Name**

Arthur Balik

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

2187 Marseille Drive

Suite, Apt. #, Etc.

**City**

Palm Beach Gardens

**State**

FL

**Zip Code**

33410-1279

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*Arthur Balik*

REGISTERED AGENT MUST SIGN

Date

4-4-03

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTD	Arthur Balik	2187 Marseille Dr.	Palm Beach Gardens, FL 33410-1279
VSD	Barbara Balik	2187 Marseille Dr.	Palm Beach Gardens, FL 33410-1279

**10. 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:**

*Arthur Balik*

Arthur Balik

4/4/03

561-624-3939

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)



## SMYTH & HAUCK, P.A.

CERTIFIED PUBLIC ACCOUNTANTS

Paul F. Smyth, CPA  
Darby M. Hauck, CPA

William H. Hines, CPA  
Wanda W. Bergeron, CPA  
Jane E. Gravelle, CPA

Members  
American Institute of  
Certified Public Accountants  
Florida Institute of  
Certified Public Accountants

April 4, 2003

Division of Corporations  
409 East Gaines St.  
Tallahassee, FL 32399

Attn: Ms. Barbara Mitchell

RE: A & B Sales Corp. of Palm Beach, Inc.  
Document #P95000085634

Dear Ms. Mitchell:

Confirming our conversation of this afternoon, enclosed please find a check in the amount of \$608.75 along with a Corporation Reinstatement form for the above entity.

Please accept this check and reinstatement form for filing fees for the years 2000 through 2003 and a Certificate in Good Standing.

As we discussed, and as your records show, both the registered agent and officer of this corporation have moved and the post office did not forward the annual reports to our client's current address.

We greatly appreciate your understanding in this matter.

Sincerely,  
SMYTH & HAUCK, P.A.

Paul F. Smyth  
Certified Public Accountant

PFS/sdp

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