

APPLICATION
FORFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 OCT 26 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDADOCUMENT # **P96000008832**

1. Corporation Name

GEORGE FINK, INC.

Principal Place of Business

Mailing Address

2911 N.W. COMMERCE PARK DR.
BAY 3
BOYNTON BEACH FL 334262911 N.W. COMMERCE PARK DR.
BAY 3
BOYNTON BEACH FL 33426

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

01/22/1996

5. FEI Number

65-0642754

Applied For
Not Applicable6. CERTIFICATE OF STATUS DESIRED ☐

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
P	FINK, GEORGE E	8330 NORTH MIZZEN DRIVE	BOYNTON BEACH FL 33437
VP	LEWANDOWSKI, KATHALEEN T	1803 BANYAN CREEK CIRCLE NORTH	BOYNTON BEACH FL 33436
S	LEWANDOWSKI, KATHALEEN T	1803 BANYAN CREEK CIRCLE NORTH	BOYNTON BEACH FL 33436
T	BIRD, FRANK	430 ROSEMARY AVE, APT. 1	WEST PALM BEACH FL 33401
VP	LEWANDOWSKI, Edward	1803 BANYAN CREEK CIR N	BOYNTON BEACH FL 33436

8. Name and Address of Current Registered Agent

DUVALL, DIANE C
105 SOUTH NARCISSUS AVE. SUITE 505
WEST PALM BEACH FL 33401

Name

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

Suite, Apt. #, Etc.

City

***150.00 State ***150.00

FL

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

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 indicate on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

George E Fink, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR10/18/00
Date586-3920
Daytime Phone #

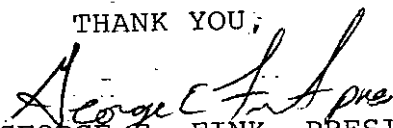


10-18-00

TO WHOM THIS MAY CONCERN:

THIS IS IN REFERENCE TO CORPORATE ANNUAL REPORT FOR GEORGE FINK, INC..THE FIRST REPORT WE RECEIVED, WAS FILLED OUT AND RETURNED TO YOUR OFFICE,BUT RECEIVED NO REPLY, UNTIL NOW. WE ARE NOT SURE WHAT HAPPENED TO THIS REPORT, SINCE WE NOW REALIZE,THE CHECK HAD NEVER BEEN RETURNED. TAKING THIS INTO CONSIDERATION, WE ARE HOPING, YOU WILL PLEASE, WAVE ALL LATE FEES.THANK YOU FOR YOUR HELP.

THANK YOU;


GEORGE E. FINK, PRESIDENT