

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 # P96000019144**

1. Corporation Name

**PELT REALTY CORP.**

Principal Place of Business

C/O UNITED CORPORATE SERVICES, INC.  
801 N.E. 187TH ST., STE. 300  
NORTH MIAMI BEACH FL 33162

Mailing Address

C/O UNITED CORPORATE SERVICES, INC.  
801 N.E. 187TH ST., STE. 300  
NORTH MIAMI BEACH FL 33162

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

2. New Principal Office Address, If Applicable

2105 Tamiami Trail

3. New Mailing Office Address, If Applicable

2105 Tamiami Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Port Charlotte, FL

City & State

Port Charlotte, FL

Zip

33948-2186

Country

USA

Zip

33948-2186

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

**03/01/1996**

5. FEI Number

65-0696972

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
<del>D</del>	<del>BARR, RAY A</del>	<del>10 BANK STREET</del>	<del>WHITE PLAINS NY 10000</del>
<del>D</del>	<del>SKUBIOKI, MARK</del>	<del>10 BANK STREET</del>	<del>WHITE PLAINS NY 10000</del>
D	Dennis Amadio	253 Divinci Dr	100002546511--2 Port Charlotte, FL 33948 ****908.75 ****908.75
D	Angelo Grudolfo	4000 Bal Harbor Blvd	Port Charlotte, FL 33950

**REINSTATEMENT**

8. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES, INC.  
801 N.E. 187TH STREET  
SUITE 300  
NORTH MIAMI BEACH FL 33162

9. Name and Address of New Registered Agent

Name

Dennis B. Goldstein

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

23462 Patern Ave

Suite, Apt. #, Etc.

City

Port Charlotte

State

FL

Zip Code

33940

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]

Date

5/19/98

REGISTERED AGENT MUST SIGN

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:

[Signature]

Dennis Amadio

5/19/98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #