

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 # P96000026602

1. Corporation Name

DELUXE INVESTMENT COMPANY

99 APR -2 PM 1:55

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

23282 TORRE CIRCLE
BOCA RATON FL 33433

Mailing Address

23282 TORRE CIRCLE
BOCA RATON FL 33433

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

2. New Principal Office Address, If Applicable

2700 W. Cypress Creek

Suite, Apt. #, etc.

Suite C103

City & State

Ft. Lauderdale, FL

Zip

33309

Country

USA

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite C103

City & State

Ft. Lauderdale, FL

Zip

33309

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/25/1996

5. FEI Number

65-0664211

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
P/S/D	Ian Markofsky	2700 W. Cypress Creek Suite C103 Ft. Lauderdale, FL 33309	
Asst. s	Adam Gottbetter	C/O Kaplan Gottbetter & Levenson 630 Third Ave.	New York, NY 10017

990002832289-0
-04/07/99-01078-019
***1050.00 ***1050.00

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

Karen B. Rozar

Karen B. Rozar, As Its Agent

REGISTERED AGENT MUST SIGN

Date

4/2/99

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2 26 99

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CR2E040 (8/97)