

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Matha
Secretary of State
DIVISION OF CORPORATIONS

CG-000R

FILED

00 APR 27 PM 4:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000030457

1. Corporation Name

SCHER JEWELERS, INC.

Principal Place of Business

927 WASHINGTON AVE.
MIAMI BEACH, FLORIDA
33139

Mailing Address

SAME

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

4. Date Incorporated or Qualified
To Do Business in Florida

04-01-96

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0734775

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	MALVIN SCHER	927 WASHINGTON AVE.	MIAMI BEACH, FL. 33139

600003245026--8
-05/09/00--01102--002
****388.00 ****388.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MALVIN SCHER

927 WASHINGTON AVE.

MIAMI BEACH, FLORIDA 33139

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

Mal Sch

Date *4-28-00*

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 name 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:

Mal Sch

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-00

Date

Daytime Phone #

Scher Jewelers, Inc.
927 Washington Ave.
Miami Beach, Florida 33139

April 26, 2000

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: Scher Jewelers, Inc. 65-0734775
1999 Annual Report
2000 Uniform Business Report

Dear Sir/Madam:

Enclosed please find a check in the amount of \$ 300. Please apply the check in the following manner
\$ 150 for the 1999 Annual Report fee and \$ 150 for the 2000 Uniform Business Report.

I asked that you accept these amounts and remove any reinstatement fees for the following reasons:

1. This is the first time that I have not paid this fee (1999).
2. In the first couple of months of 1999 I had quadruple heart surgery and unfortunately my business suffered greatly. The entire year I was in poor health and I was not even aware of the fact that I was not an active corporation until my accountant brought it up for this year (the Uniform Report 2000)

Based on the above please accept the check and reinstate the corporation with not additional costs.
Thank you very much for your help in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Malvin Scher", written in a cursive style.

Malvin Scher
President