

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 NOV 19 AM 7:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000075834

1. Corporation Name

KALROY CONTRACTORS INC.

Principal Place of Business

8190 CLEARY BLVD. VILLA 1901  
PLANTATION FL 33324

Mailing Address

8190 CLEARY BLVD. VILLA 1901  
PLANTATION FL 33324

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

09/11/1996

5. FEI Number

65-0700714

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
D	ROSENBLATT, TODD	8190 CLEARY BLVD. VILLA 1901	PLANTATION FL 33324

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ROSENBLATT, TODD  
8190 CLEARY BLVD. VILLA 1901  
PLANTATION FL 33324

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

*Todd Rosenblatt* **SIGNATURE REQUIRED**

REGISTERED AGENT MUST SIGN

Date 11/18/98

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)(f), 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:

*Todd Rosenblatt* **SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/18/98  
Date

305-379-8944  
Daytime Phone #

CR2E040 (9/96)



**Eichler Bergsman & Co., LLP**  
*Certified Public Accountants*

404 Park Avenue South • New York, New York 10016  
Tel 212•447•9001 Fax 212•447•9006

Philip A. Baumgarten  
Gilbert Bergsman  
Paul Eichler  
Richard M. Plutzer  
Michael E. Silverman

November 16, 1998

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, Florida 33214-6327

Re: Kalroy Contractors Inc.  
ID# 65-0700714

Dear Sir or Madam:

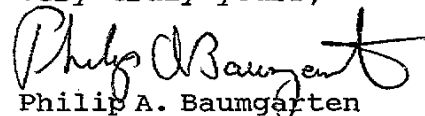
As accountants for the above referenced taxpayer we are enclosing a fully executed Application for Reinstatement.

Please note the taxpayer did not receive the annual report forms for 1998. As such the taxpayer could not timely file its annual report.

In view of the above we respectfully request that the late fees be waived. In this regard we enclose taxpayer's check for \$150.00.

Thank you for your attention to this matter. Should you need any additional information please contact the undersigned.

Very truly yours,

  
Philip A. Baumgarten