

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS

152 FILED

DOCUMENT # P97000001052

02 DEC -2 AM 8:30

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1. Corporation Name CALIGUIRE & ASSOCIATES, INC.

Principal Place of Business 6773 LAS COLINAS CT LAKE WORTH FL 33463 Mailing Address 6773 LAS COLINAS CT LAKE WORTH FL 33463



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

6/3/02 9/20/01 016 150^{sd}

2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4. Date Incorporated or Qualified To Do Business in Florida 01/06/1997 5. FEI Number 65-0738277 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

Table with 4 columns: Title(s), Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Row 1: D, CALIGUIRE, RACHEL, 6773 LAS COLINAS CT, LAKEWORTH FL 33463

8. Name and Address of Current Registered Agent: FILINGS, INC., 3732 N.W. 16TH STREET, FT. LAUDERDALE FL 33311-4132. 9. Name and Address of New Registered Agent: Name RACHEL CALIGUIRE, Street Address 6773 LAS COLINAS COURT, City Lake Worth, State FL, Zip Code 33463

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. or 617.0505, F.S. Signature of Registered Agent: 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. SIGNATURE: REGISTERED AGENT MUST SIGN

CR2E040 (8/02)

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Barry J. Staum
Certified Public Accountant

**1515 University Drive
Suite 115
Coral Springs, FL 33071
Phone: (954) 344-3662
Fax: (954) 340-6859**

November 18, 2002

**Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314**

**Re: Reinstatement - Caliguire & Associates Inc.
P97000001052**

To Whom It May Concern:

On behalf of our client, enclosed please find an Application for Reinstatement. Our client, Caliguire & Associates Inc. has never received the Uniform Business Report for 2002.

Upon realizing the client never received the form, we filed a blank form with the appropriate information, along with a check for \$150 (copy enclosed). Please waive all penalties, interest and reinstatement fees.

Please do not hesitate to contact me if you have any further questions.

Thank you in advance for your time and consideration in this matter.

Sincerely,

Barry Staum

**BS:rs
Enc.**