

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 NOV 20 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000043611

1. Corporation Name

THE ENCHANTED CLOSET, INC.

Principal Place of Business

10113 HUNT CLUB LANE
PALM BEACH GARDENS FL 33418

Mailing Address

10113 HUNT CLUB LANE
PALM BEACH GARDENS FL 33418



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

05/12/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0774162

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	KLEIN, JEANINE M	10113 HUNT CLUB LANE	PALM BEACH GARDENS FL 33418
D	GODOWN, LISA	12477 SEMINOLE BOULEVARD	NORTH PALM BEACH FL 33408

000002700020-8
-12/02/98--01093--030
****150.00 ****150.00

TS. 11/04/98

98AR

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KLEIN, STUART B ESQ.
1551 FORUM PLACE
SUITE 400B
WEST PALM BEACH FL 33401

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

Stuart B Klein
REGISTERED AGENT MUST SIGN

Date 11/13/98

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)(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:

Jeannine Klein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/13/98

Date

561-622-5794

Daytime Phone #

CR2E040 (9/98)

The Enchanted Closet, Inc.
10113 Hunt Club Lane
Palm Beach Gardens, FL 33418

November 13, 1998
DIVISION OF CORPORATIONS ANNUAL REPORT / REINSTATEMENT SECTION
PO Box 6327
TALLAHASSEE, FL 32314-6327

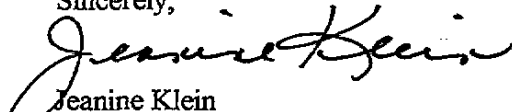
Dear Sir:

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Pusuant to a conversation with a represetaytive from the Florida State Division of Corporations at (850) 487-6059, I am enclosing a check for \$150. I explained that with the receipt of the Notice of Administrative Dissolution or Revocation that I received yesterday, I first became aware of the fees necessary to maintain my corporation as I had not received any previous notification. Your representative informed me that I needed to send you this explanatory letter and my \$150 check and the name of my corporation would become active within three to five days from receipt.

I truly appreciate your understanding and attention to this matter.

Sincerely,


Jeanine Klein
President

Encl.