

APPLICATION FOR



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

01 AUG -8 PM 5:46

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P97000080265**

1. Corporation Name
BOCA TROPICS, INC.

Principal Place of Business Mailing Address
~~3827 W ATLANTIC AVE DELRAY BEACH FL 33445~~
~~3827 W ATLANTIC AVE DELRAY BEACH FL 33445~~



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

2. New Principal Office Address, If Applicable
~~20423 State Rd 7~~
 Suite, Apt. #, etc. ~~# 140~~
 City & State ~~Boca Raton FL~~
 Zip ~~33498~~ Country ~~Palm Bch~~

3. New Mailing Office Address, If Applicable
 Suite, Apt. #, etc. *same*
 City & State

4. Date Incorporated or Qualified To Do Business in Florida
09/15/1997

5. FEI Number **65-0782977**
 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	4 City / State / Zip
PD	STASZAK, RAYMOND G	3827 W ATLANTIC AVE 19614 Star Island Drive	DELRAY BEACH FL 33445 Boca Raton, FL 33498
VD	STASZAK, CATHERINE R	3827 W ATLANTIC AVE 19614 Star Island Drive	DELRAY BEACH FL 33445 Boca Raton, FL 33498
			600004547876--9 -08/22/01--01007--002 ***300.00 ***300.00
			00-014BR 78

8. Name and Address of Current Registered Agent
~~STASZAK, CATHERINE R~~
~~3827 W ATLANTIC AVE~~
~~DELRAY BEACH FL 33445~~

9. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 19614 Star Island Drive
 Suite, Apt. #, Etc.
 City Boca Raton State FL Zip Code 33498

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 *[Signature]* Date **7-26-01**
 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. 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 due 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]* Catherine R. Staszak, VP/Dir. 561/482-2925
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/00)

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Sewell and Company, PA
Certified Public Accountants

July 31, 2001

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Boca Tropics, Inc.
P97000080265

Dear Sir:

The taxpayer referenced above recently received the enclosed notification from your office that their corporation was dissolved for failure to file the 2000 Uniform Business Report. We have researched this matter and find no record of the taxpayer having received the original 2000 UBR from your office. This form was apparently delivered to a previous address - that of Boca Tropics' landlord, and ended up in a desk drawer. It was recently forwarded to Boca Tropics by the landlord's new bookkeeper. This taxpayer is very diligent in filing all tax and government related forms and has always filed and paid timely in the past. For some unknown reason, the 2000 UBR form was never forwarded to their current address.

Enclosed is a check for \$300, payment for the original 2000 filing fee of \$150 plus \$150 for the 2001 filing fee. Due to the circumstances outlined above, as well as their excellent history for timely filing in previous years, we respectfully request your consideration in waiving the reinstatement fees for Boca Tropics, Inc.

Thank you for your cooperation in this matter.

Very truly yours,

Thomas E. Sewell, C.P.A.
SEWELL AND COMPANY, PA

TES/dl

Enclosure

CC: Boca Tropics, Inc.

7705 Davie Road Extension • Hollywood, Florida 33024
(954) 432-3100 • Dade (305) 620-0616 • Fax (954) 436-6898