

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 24 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000088430

1. Corporation Name

C E L COMPUTERS & EQUIPMENT LEASING CORPORATION

Principal Place of Business

Mailing Address

3215 N.E. 15TH ST., #203
POMPANO BEACH FL 33062
US

3215 N.E. 15TH ST., #203
POMPANO BEACH FL 33062
US



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

10/14/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

65-0787601

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 3	City / State / Zip 4
P	HASPEL, MICHAEL	3215 NE 15TH ST #203	POMPANO BEACH FL 33062

400008565974
10/24/02--01044--008 **150.00

10/28

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HASPEL, MICHAEL
3215 NE 15TH STREET
APT. 203
POMPANO BEACH FL 33062

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 10/22/02

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 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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/22/02

CR2E040 (8/02)

**CEL Computer & Equipment
Leasing Corporation**

3215 NE 15th Street • Suite 203
Pompano Beach, Florida 33062
Phone 954-984-9499 • Fax: 954-984-4643

October 22, 2002

Division of Corporations
Annual Report / Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

To whom it may concern:

This letter is to inform you that CEL Leasing Corp. sent its Annual Report filing paperwork and a check for \$150.00 on September 9th, 2002. On October 21st, 2002 I received a Notice of Dissolution. I feel that this notice is in error so I am resending the payment of \$150.00 with the red paperwork. I called your department and they informed me that the \$150.00 check was not receive, I also spoke with my bank about this CEL's check and two others companies that I filed at the same time. The bank told me that the two other companies checks that I filed along with CEL's had cleared but the CEL check did not. I have put a stop payment on the check #1696 for the CEL Annual Fee and have included a new check # 1706 for the \$150.00 filing fee. Thank you for your assistance.

Sincerely,



Michael Haspel
President/CEO