		PLEASE READ	ALL INST	RUCTIONS	BEFORE C	COMPLETI	NG THIS FORM.	.40
APPLICATION FÓR- REINGTATEMENT		FLORIDA PSPARTMENT IF STATE (atherine 1) Secretar of State DIVISION OF CORPORATIONS			SECRETA TALLAHAS	TILED RY OF STATE SSEE, FLORIDA	1952	
DOCUMENT # P9800008868 1. Corporation Name LAW OFFICES OF LISA R. GINSBURG, P.A.						01 OCT 2	5 PH 1: 23	
			Mailing Addre					
Principal Place of Business 7933 BW 7TH AVE MIAMI FL 33150-3298			7933 BW 7TH AVE MIAMI FL 33150-3298					
If above addresses are incorrect in any way, line through incorrect 2. New Principal Office Address, If Applicable 3. New Ma Suite, Apt. #, etc. Suite, Apt. #, etc.				ling Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 01/28/1998 5. FEI Number Applied For		
City & State			City & State				65-0808962	Applied For Not Applicable
Zip Country Zip		Zip	Country		6. CERTIFICATE	OF STATUS DESIRED S8.75	Additional Fee required a Certificate of Status	
7. Names a	and Street Ad	dresses of Each Officer and/e	or Director (Flor					
Title(s) Name of Officers and/or Directors 2				Street Address of Each Officer and/or Director			City / State / Zip	
D	GINSBURG, LISA R			7933 NW 7 AVE			MIAM! FL 33150	
			9			000046796893 -11/14/0101096016 ****150.00 ****150.00		
								SP
8. Name and Address of Current Registered Agent 9. Name and Address of New Registe								ent
Name					Name	3. Italie alia A		(8/01)
GINSBURG, LISA R 7933 NW 7TH AVE MIAMI FL 33150-3298					Street Address (P.O. Box Number is Not Acceptable)			
					Suite, Apt. #, Etc) .	5	
					City		State FL	Zip Code
		e registered agent of the above	ve named corpo	ration, am familiar wi	ith and accept the o	obligations of Section	. /	
Signature of Registered Agent SIGN SIGN Date /B 23 01								
this reins owed by	statement ap the corporat	plication, the reason for disso	lution has been ames of individ	eliminated, the corpo uals listed on this for	orate name satisfies m do not qualify for	the requirements an exemption und	opter 607 or 617, F.S. I further co of section 607.0401 or 617.040 der section 119.07(3)(i), F.S. Th	1, F.S., that all fees

SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Phone #

LISA R. GINSBURG, P.A.

LISA R. GINSBURG ATTORNEY AT LAW CERTIFIED MEDIATOR

7933 N.W. 7th Avenue • Miami, Florida 33150-3298 Tel: (305) 757-7771 • Fax: (305) 757-7756



October 23, 2001

Florida Department of State Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, Fl. 32314-6327

Re: Law Offices of Lisa R. Ginsburg, P.A. FEI Number: 65-0808962
Document Number: P98000008868

To Whom It May Concern:

Enclosed please find an Application for Reinstatement of the Law Offices of Lisa R. Ginsburg, P.A. Our office never received the original application for renewal. Therefore, I am sending you the fee of \$150.00 to cover the cost of filing the 2001 corporation annual report/uniform business report.

Thank you for your kind consideration and expeditious handling of this matter.

Very truly yours,

Lisa R. Ginsburg, Esq.

.