

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

C

APPLICATION
REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 DEC -6 PM 2:39

DOCUMENT # P98000009699

1. Corporation Name

DEREK B. RADZIKOWSKI, INC.

Principal Place of Business

Mailing Address

980 N FEDERAL HWY
313
BOCA RATON FL 33432

3606 S OCEAN BLVD
2802
HIGHLAND BCH FL 33487

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

01/28/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0829066

Applied For

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
PD	RADZIKOWSKI, DEREK B	3606 S OCEAN BLVD #2802	HIGHLAND BCH FL 33487

000003500560--2
-12/13/00--01110--020
****150.00 ****150.00

12/11

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JORDAN, CRAIG
4901 NW 17TH WAY
SUITE 407
FORT LAUDERDALE FL 33309

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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 REQUIRED
REGISTERED AGENT MUST SIGN

Date

11/28/00

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

11-28-00

Date

Daytime Phone #

CR2E040 (8/00)

(2)

Derek B. Radzikowski, Inc.
3606 S. Ocean Blvd. #2802
Highland Beach, FL 33487-3351

P98000009699

November 20, 2000

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

RE: Derek B. Radzikowski, Inc.
Document #P98000009699

Dear Sirs,

Pursuant to our telephone conversation this morning, enclosed you will find a check in the amount of \$150.00 for the Annual Uniform Business Report for my corporation.

I had sent a check for the same amount to the Florida Department of State back prior to the initial deadline of May 15th. I had no idea that the check and annual report had not been received by the State until I received the enclosed Notice of Administrative Dissolution. I was very upset to learn that my corporation may be dissolved. I have no reason not to file this return timely as I intend on keeping the corporation active.

I am requesting that you take the above circumstances into consideration and accept my second check in the amount of \$150.00 and abate the penalties as noted in the Dissolution notice.

Your assistance in this matter would be greatly appreciated.

Sincerely,


Derek B. Radzikowski