

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 FEB 27 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000016095

1. Corporation Name

STRATEGIC CAPITAL HOLDINGS, INC.

Principal Place of Business

Mailing Address

16 Portside Dr.

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

2. New Principal Office Address, If Applicable

16 Portside Dr.

Suite, Apt. #, etc.

Unit 16C

City & State

Ft. Lauderdale, FL 33316

Zip

33316

Country

USA

3. New Mailing Office Address, If Applicable

105 Court St.

Suite, Apt. #, etc.

Suite 500

City & State

Brooklyn, NY 11201

Zip

11201

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

2/18/98

5. FEI Number

52-2137744

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	Andre Chalem	16 Portside Dr., Unit 16C	Ft. Lauderdale, FL 33316
			400003802334--3 -03/06/01--01073--001 *****8.75 *****8.75
			400003802334--3 -03/06/01--01073--002 *****300.00 *****300.00
			400003802334--3 -03/06/01--01073--003 *****750.00 *****750.00
			LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

Keith D. Kern, Esq.

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

50 SE 4th Avenue

Suite, Apt. #, Etc.

City

Delray Beach

State

FL

Zip Code

33483

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]

REGISTERED AGENT MUST SIGN

Date

2/26/01

11. This corporation owes 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Andre Chalem, President

2/26/01 (561) 276-4146
Date Daytime Phone #

CR2E081 (12/98)