APPLICATION FOR REINSTATEMENT

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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000037380

Corporation Name

STEPHAN'S INTERIOR DESIGN GROUP, INC.

Principal Place of Business	Mailing Address
025 Lavers Circle, PH505 Delray Beach, FL 33444	2025 Lavers Circle, PH505 Delray Beach, FL 33444

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

New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business In Florida: 4/24/98
Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number: 65-0900359 ☐ Applied For ☐ Not Applicable
State	City & State	6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status
Country	Zip / Country	

Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
BLACHER, STEPHAN	2025 Lavers Circle, PH505	Delray Beach, FL 33444

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REINSTATEMENT 99-00

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
BLACHER, STEPHAN 2025 Lavers Circle, PH505 Delray Beach, FL 33444	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature: Stephan Blacher
REGISTERED AGENT MUST SIGN

Date: 9-12-00

This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☐ No ☐

(See other side for information on intangible tax.)

I, 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 a 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 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: Stephan Blacher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Stephan Blacher

9/12/00
Date

(561) 243-8680
Daytime Phone #

CR2E041 (12-94)