

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -6 PM 1:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000050649

1. Corporation Name

INCENTIVE CITY, INC.

Principal Place of Business

6810 E ROGERS CIRCLE
BOCA RATON FL 33487

Mailing Address

6810 E ROGERS CIRCLE
BOCA RATON 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

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/05/1998

5. FEI Number

NOT APPLICABLE

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 3	City / State / Zip 4
D	ZUCKERMAN, EDWARDS	6810 E ROGERS CIRCLE	BOCA RATON FL 33487

700024478487
11/06/03 01034 010 **150.00

8. Name and Address of Current Registered Agent

New Registered Agent

~~POPKIN & SHURPIN, P.A.~~

~~2400 GLADES ROAD~~

~~SUITE 114~~

~~BOCA RATON FL 33431~~

Larry E. Schner
750 South Dixie Hwy
Boca Raton, FL 33432

9. Name and Address of New Registered Agent

Name

Larry E. Schner

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

750 South Dixie Hwy

Suite, Apt. #, Etc.

City

Boca Raton

State

FL

Zip Code

33432

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] P.A. *[Signature]*
REGISTERED AGENT MUST SIGN

Date Nov 3, 2003

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/29/03

561-999-0888

CR2E040 (7/03)

Incentive City, Inc.
6810 East Rogers Circle
Boca Raton, FL 33487

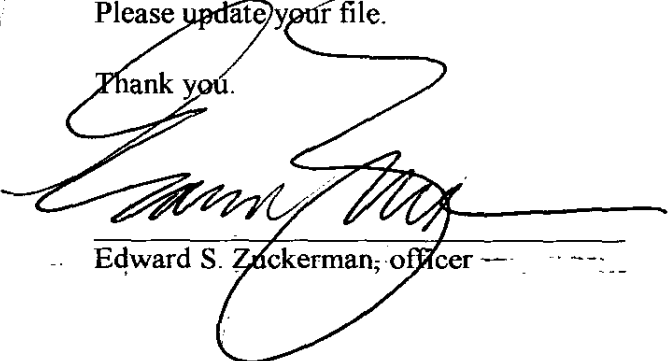
Division Of Corporations
PO Box 6327
Tallahassee, FL 32314

October 28, 2003

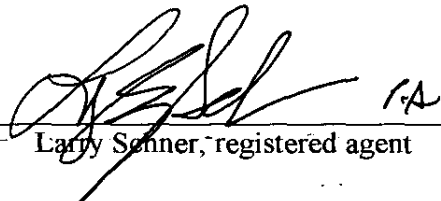
RE: Reinstatement of Corporation

Please be advised that we did not receive the annual reports for 2003. I was told by an agent that the last forms that were mailed to us were returned. We would like to have our corporation reinstated. Enclosed is our check for \$ 150.00. We have changed our registered agent to Mr. Larry Schner 750 South Dixie Hwy. Boca Raton, FL 33432. Please update your file.

Thank you.



Edward S. Zuckerman, officer



Larry Schner, registered agent