

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
 Jim Smith  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

02 NOV -5 AM 9:05

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # P98000055951

1. Corporation Name  
 ESTATE & RETIREMENT CONSULTANTS INC.

Principal Place of Business	Mailing Address
80 SW 8TH STREET STE 2000 MIAMI FL 33130	1170 99 STREET APT 4 BAY HARBOR ISLANDS FL 33154



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

2. New Principal Office Address, If Applicable 1170 99 ST #4 BAY HARBOR ISLANDS FL 33154 Suite, Apt. #, etc. 4	3. New Mailing Office Address, If Applicable 1170 99 ST #4 BAY HARBOR ISLANDS FL 33154 Suite, Apt. #, etc. 4	4. Date Incorporated or Qualified To Do Business in Florida 06/23/1998
City & State BAY HARBOR ISLANDS FL	City & State BAY HARBOR ISLANDS FL	5. FEI Number 65-0845146
Zip 33154	Country USA	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	BAROUK, BARRY	1170 99TH STREET APT 4	BAY ISLANDS ISLANDS FL 33154

700008810977  
 11/05/02--01094--013 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BAROUK, BARRY PO BOX 174 D02 1170 99 STREET #4 BAY HARBOR ISLANDS FL 33154	Name BARRY BAROUK Street Address (P.O. Box Number is Not Acceptable) 1170 99 ST Suite, Apt. #, Etc. 4 City BAY HARBOR ISLANDS State FL Zip Code 33154
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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 REQUIRED** \_\_\_\_\_ Date 10-31-02  
 REGISTERED AGENT MUST SIGN

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** \_\_\_\_\_ Date 10-31-02 Davtime Phone # 305-889-8824  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (8/02)

11/01/02

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

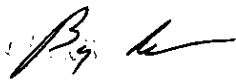
Subject: Estate & Retirement Consultants, Inc. #P98000055951, FEI # 65-10845146

To Whom it May Concern:

I never received the Uniform Business Report bill for the prior year.(2002) Please—  
indicate new registered agent as Barry Barouk, 1170 99 Street #4, Bay Harbor Islands,  
FL. 33154. (at correct address) That P.O. Box was never mine) Also, I previously sent a  
letter to change my address from 80 S.W. 8<sup>th</sup> St Ste200 to current address of 1170 , 99  
Street #4, Bay Harbor Islands, Fl. 33154

Enclosed please find check for \$150.00 to reinstate Corporation due to non receipt of  
prior Uniform Business Report.

Thank You!

  
Barry Barouk