

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 15 AM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300009021783
11/15/02--01051--003 **150.00

DOCUMENT # 998000077576

1. Corporation Name

Palm Beach Collectors
Society, Inc.

2. Principal Office Address

1855 Griffin Rd

3. Mailing Office Address

1855 Griffin Rd.

Suite, Apt. #, etc.

DCOTA Suite A316

Suite, Apt. #, etc.

DCOTA Ste. A316

City & State

Dania Beach Fl.

City & State

Dania Beach Fl.

Zip

33004

Country

USA

Zip

33004

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

9-8-98

5. FEI Number

65-1096108

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Eleanor Miner

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

1855 Griffin Rd. Ste A316

Suite, Apt. #, Etc.

Dania Beach Fl. 33004

City

Dania Beach FL 33004

State
FL

Zip Code

33004

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Eleanor Miner

REGISTERED AGENT MUST SIGN

Date

11-06-02

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Eleanor Miner	330 SO. Blvd P.B. Fl.	Palm Beach Fl. 33480
V	Nettie Efton	4816 Exeter Estate Ln	Lake Worth Fl 33467
S-T	Craig Miner	330 SO. Blvd	Palm Beach Fl 33480

10. 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:

Eleanor Miner Eleanor Miner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954-927-6650
11-8-02

Daytime Phone #

CR2E081 (8/01)

97 11/20



PALM BEACH COLLECTOR

November 7, 2002

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

Dear Sir/Madam;

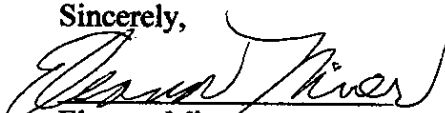
Please be advised that I am writing to request a reinstatement for the corporation Palm Beach Collector Society, Inc.

Unfortunately I never received the letter requesting a payment for the corporation. The address changed and I had not received all my mail. I would have immediately forwarded any documents to my accountant and he would have advised me what, when and where to pay.

The change of address is:
Palm Beach Collector Society, Inc.
D.C.O.T.A suite a316
1855 Griffin Road.
Dania Beach Fl 33004

Please forgive this mistake and issue our reinstatement. I am submitting a check for a hundred and fifty dollars as was explained to me on the phone. I have enclosed the form required.

Sincerely,



Eleanor Miner