

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 FEB -4 AM 10:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000008297

1. Corporation Name

Carnegie Financial, Inc.

2. Principal Office Address

123 NW 13th St

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

#312

Suite, Apt. #, etc.

City & State

Boca Raton FL

City & State

Zip

33432

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01-25-99

5. FEI Number

65-0895071

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

Roy Glasberg

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

123 NW 13th St

Suite, Apt. #, Etc.

#312

City

Boca Raton

State
FL

Zip Code

33432

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

REGISTERED AGENT MUST SIGN

Date 1-27-03

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
PRES	Roy Glasberg	1519 SW 6 th Terr	Boca Raton FL 33432

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

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Carnegie Financial, Inc.
123 NW 13th Street
#312
Boca Raton, FL 33432

January 27, 2003

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Corporate Restatements and abatement of penalty

To whom it may concern,

As instructed I have enclosed a check for \$300 covering the annual fees for both 2002 and 2003. I am requesting an abatement of the \$600 re-instatement penalty due to the fact that I did not receive the form having moved during the year from Suite 313 to Suite 312.

Thanking you in advance.

Roy E. Glassberg, Pres

