

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



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

FILED

02 NOV 26 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P9900000 9939

1. Corporation Name

Paul Richard, Inc.

2. Principal Office Address

141 W. Tropical Way

Suite, Apt. #, etc.

City & State

Plantation FL

Zip

33317

Country

U.S.A

3. Mailing Office Address

141 W. Tropical Way

Suite, Apt. #, etc.

City & State

Plantation FL

Zip

33317

Country

U.S.A

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0891926

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

Paul Heyman

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

141 W. Tropical Way

Suite, Apt. #, Etc.

City

Plantation

State
FL

Zip Code

33317

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

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
P	VICTORIA ROMANO-SLACK	2509 NE 26 Terr	Ft. Lauderdale, FL 33305
VP	Paul Heyman	141 W. Tropical Way	Plantation, FL 33317

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)(f), 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:

Paul Heyman

Paul Heyman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PAUL RICHARD, INC

September 15, 2002

Re: Paul Richard, Inc.
Doc # P99000009939

To Whom It May Concern:

It has come to my attention that my corporation Paul Richard, Inc is not active due to non-payment of the UBR for 2001. Please know that I never received the UBR for 2001. I have executed a reinstatement form and attached it to this letter. I am attaching a check for \$300.00 for 2001 and 2002. Please waive any penalties since out of no fault of mine the UBR was never received.

Cordially,



Paul Heyman
Vice President & Director