

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

FILED

00 NOV -6 AM 9: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000012317

1. Corporation Name

STEPHEN A. YATES, P.A.

Principal Place of Business

Mailing Address

4312 N.E. 21ST AVE.
FT. LAUDERDALE FL 33308

4312 N.E. 21ST AVE.
FT. LAUDERDALE FL 33308



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/08/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0904917

Not Applicable

Zip

Country

Zip

Country

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
P	YATES, STEPHEN A	4312 N.E. 21ST AVE.	FT. LAUDERDALE FL 33308

SP

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

YATES, STEPHEN A
4312 N.E. 21ST AVE.
FT. LAUDERDALE FL 33308

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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.

Signature of
Registered Agent

[Signature]

Date *11/2/00*

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/2/00 *954-771-1805*

CR2E040 (8/00)

CPA

BARRY M. DANZINGER, P.A.

Certified Public Accountant

3326 N.E. 33rd Street

Ft. Lauderdale, FL 33308

Phone: (954) 568-9337

Fax: (954) 568-9338

Toll Free: 1-888-857-2227

October 30, 2000

Division of Corporations

Annual Report/Reinstatement Section

P.O. Box 6327

Tallahassee, FL 32314-6327

Re: Stephen A. Yates, P.A.

4312 N.E. 21st Avenue

Ft. Lauderdale, FL 33308

Document # P99000012317

To whom it may concern:

The above mentioned corporation received a Notice of Dissolution effective September 22, 2000.

The corporation paid a \$550.00 fee filing fee on July 19, 2000 prior to the dissolution period.

We are asking for the corporation to be reinstated since the proper filing fees were paid timely and to abate any penalties or fees for reinstatement since all fees were paid.

Please call us if we can be of further assistance.

Sincerely,

Barry M. Danzinger, CPA

Barry M. Danzinger, CPA