

CORP (RAT A		RIDA DEPAR (NT) Kati erir a s Secultar (Cata)	
	GO WE I	DIVISION & DR AND	

DOCUMENT # POP100029718 1. Corporation Name Neil G. Goldhaber MD PA

SIGNATURE:

FILED

01 MAR 16 PM 4: 10

SECRETARY OF STATE: TAULAHASSEE FLORIDA

3/3/01

				:				
2. Principal Office Address 8198 JOG ROAD		3. Mailing Office Address Dale Terrace						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			porated or Qualified 3 - 34	2-99		
City & State	NTO	N BEACH, FI	City & State WELLING	TON, FL	5. FEI Numb	-	Applied For Not Applicable	
^{Zip} 334	37	Country U.S.	33414	Country U,S.	6.	E OF STATUS DESIDED T \$8.75 Ad	ditional Fee required ertificate of Status	
)	7. Name and A	ddress of Current Register	ed Agent			
	Name	Jeil G. G	oldhaber	-				
		dress (P.O. Box Number is No. 1395 W00.	d Dale T	errace				
	™Sûitë, Apt	Welling tor	1.FL	33414	•			
	City					State Zip Code		
8. I, being	appointed th	e registered agent of the abov	e named corporation, and	apiliar with and accept the ob	oligations of sect	ion 607.0505 or 617.0503, F.S.		
Signature of Registered A) A	GISTERED AGENT MUST	SIGN		Date 3-13-01		
9. Names	and Street A	Addresses of Each Officer and	or Director (Florida nonpro	fit corporations must list at lea	ast 3 directors)			
Titles		Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip		
PRES.	Neil	G.Goldhaber	1395	Wood Dale Ter	race	Wellington .FL.	33414	
					5	 1000038925 -03/22/01010 	956016 ****300.00	
						LS		
							·	
this rein	istatement a y the corpora	pplication, the reason for disso ation have been paid and the r s true and accurate, and my sig	olution has been eliminated names of individuals listed o gnature shall have the same	, the corporate name satisfies on this form do not qualify for a e legal effect as if made under	the requirement an exemption und roath.	apter 607 or 617, F.S. I further certify s of section 607.0401 or 617.0401, F der section 119.07(3)(i), F.S. The info	.S., that all fees rmation indicated	
		well ochor	R NEILG	GOLDHARER	2	3/3/61 5617	34-3030	

NEIL G GOLDHABER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



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

RE:

Neil G. Goldhaber, M.D., P.A.

EIN 65-0907956

Uniform Business Report Filing

To Whom It May Concern:

I, Neil Goldhaber, recently discovered that my Corporation (referenced above) has inadvertently been inactivated. Upon investigation, I realized that what more than likely happened is as follows: I incorporated my practice in March of 1999. At that time I was using my home address for business mail – 2810 Wilderness Road, West Palm Beach, Florida 33409. Sometime in late summer of 1999 I moved to a new home, address – 1395 Woodale Terrace, Wellington, Florida 33414 and my mail was being forwarded. Apparently, if the Department of State did mail the form out, it went to my old address and never got forwarded to my new address. And, since this is my first time in business for myself, I was unaware of the filing fees and that I should be expecting such a form in the mail. Now that I am fully aware of the required annual filing fees (and dates), my Corporation shall be in compliance henceforth.

As such, I would like to request an abatement of any penalty associated with last year's oversight regarding the annual corporate filing fees. I have enclosed with this letter a Reinstatement Application as well as a check in the amount of \$ 300 payable to the Department of State. This should cover last year's and this year's Uniform Business Report fees. I am anticipating that my Corporation will now be considered reactivated and in current good standing with the Division of Corporations.

Respectfully,

Neil G. Goldhaber, President

CM:tsc

Enclosures: Reinstatement Application

Check-for \$300

L:\Db\G\Goldhaber\Corp Reactivation-CM-ltr.doc