

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P99000038327**

1. Corporation Name

ENCC Corporation

2. Principal Office Address
3840 N. 48 Ave

Suite, Apt. #, etc.

City & State
Hollywood, FL

Zip
33021

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 00-06

4. Date Incorporated or Qualified
To Do Business in Florida **04/27/99**

5. FEIN Number
65-0923257

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
Robert Glazer

Street Address (P.O. Box Number is Not Acceptable)
3840 N. 48 Ave

Suite, Apt. #, Etc.

City
Hollywood

State
FL

Zip Code
33021

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

Robert Glazer

Date **3/10/06**

REGISTERED AGENT MUST SIGN

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 S T	Robert Glazer	3840 N. 48 Ave	Hollywood, FL 33021

600069444786
04/04/06--01054--013 **1050.00

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 contained in Chapter 119, 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:

Robert Glazer

Robert Glazer

3/10/06

954-274-1939

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2022

ENCC CORPORATION

3840 N 48TH AVENUE
HOLLYWOOD, FL 33021

To Whom It May Concern:

Please find enclosed a check for \$ 1,050.00 for my filing fees from 2000 – 2006 at \$150.00 per year. I attest that I never received any correspondence regarding a Corporate Annual Report Notice, and therefore, respectfully request that any penalties be waived.

If you need anything further, please contact me at 954-274-1939.

Thank You,

Robert Glazer - President