

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

1982

**APPLICATION
FOR
REINSTATEMENT**



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

DOCUMENT # P99000039079

1. Corporation Name

JOHN GIORDANO'S HOLISTIC ADDICTION TREATMENT PROGRAM, INC.

Principal Place of Business

Mailing Address

16170 N.E. 11TH COURT
NORTH MIAMI FL 33162

16170 N.E. 11TH COURT
NORTH MIAMI FL 33162

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/29/1999

5. FEI Number

65-0940060

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	GIORDANO, JOHN	16170 N.E. 11TH COURT	NORTH MIAMI FL 33162
D	GIORDANO, MICHELE	16170 N.E. 11TH COURT	NORTH MIAMI FL 33162
D	GIORDANO, ATHENA	16170 N.E. 11TH COURT	NORTH MIAMI FL 33162

100003491381--3

12/08/00-01022-024

****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

THE LAW OFFICES OF CRAIG M. DORNE, P.A.
3050 BISCAYNE BLVD. STE. 801
MIAMI FL 33137

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Craig M. Dorne
REGISTERED AGENT MUST SIGN

Date

11/4/00

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR


John Giordano

Date

Daytime Phone #

11/5/00 305 9459384

CR20040 (8/00)



John J. Giordano,
CAP, MAC, CCJS
Program Director

Jerry Goldfarb
CEO

Barry Goodman
Outreach Director

Barbara Savino
BA, CAP, CADC, CCJS, MAC
Clinical Supervisor

Evan J. Zimmer, MD
Psychiatrist

Dr. Deborah Mash
Detox Consultant / I. Bogaie

Jeffrey D. Kamlet MD
Internal / Addiction
Medicine consultant

Keith Monteleone
BLS, CAP, Lead Therapist

Arthur Anderson
Nationally Certified Acupuncture

Sherry Fagin
BS, Case Manager

Jerry Murray
BLS, CAP
DUI/Out Patient Director

Trudiann Smith
Administrator

John Giordano's Holistic ²⁹⁶² Addiction Treatment Program, Inc.

Detox • Intensive Out Patient • In Patient • Long Term Treatment

P99000039079

November 22, 2000

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee FL 32314-6327

RE: P99000039079

Dear Sirs:

I am writing to inform you of the notice of administrative dissolution that we received in our office, this was the very first notice we received regarding the 2000 corporation annual report/uniform business report. We are hereby requesting that consideration be granted to our corporation regarding this matter and that our business report will be reinstated effective immediately. We have enclosed a payment of \$150.00 for reinstatement fees.

Your consideration is greatly appreciated.

Sincerely,


John J. Giordano
Program Director