

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -6 AM 10:41

DOCUMENT # P99000043670

1. Corporation Name

FIRST ATLANTIC GROUP, INC.

Principal Place of Business

1111 KANE CONCOURSE
SUITE 401
BAY HARBOR FL 33154

Mailing Address

1111 KANE CONCOURSE
SUITE 401
BAY HARBOR FL 33154



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.
3586 FLAMINGO DRIVE
City & State
MIAMI BEACH FL

3. New Mailing Office Address, If Applicable

PO Box 402592
Suite, Apt. #, etc.
MIAMI BEACH
City & State
FL 33140

4. Date Incorporated or Qualified
To Do Business in Florida

05/13/1999

5. FEI Number

65-093-8306

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
PSD	HUTMAN, BERNARD D	1111 KANE CONCOURSE 3586 FLAMINGO DRIVE MIAMI BEACH	BAY HARBOR FL 33154 MIAMI BEACH FL 33140
VTD	HUTMAN, MICHAEL W	1111 KANE CONCOURSE 3586 FLAMINGO DRIVE	BAY HARBOR FL 33154 MIAMI BEACH FL 33140

200003479082-2
-11/28/00-01102-000
****150.00 ****150.00

8. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

OLD

9. Name and Address of New Registered Agent

Name
ALAN SAKOWITZ Esq.
Street Address (P.O. Box Number is Not Acceptable)
1111 KANE CONCOURSE
Suite, Apt. #, Etc.
SUITE 401
City
BAY HARBOR ISLANDS
State
FL
Zip Code
33154

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]
REGISTERED AGENT MUST SIGN

Date

11/2/00

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

10/24/00 (305) 532-0552
Date Daytime Phone #

CR2E040 (8/00)

FIRST ATLANTIC GROUP, INC

MAIL:P.O. Box 402592
Miami Beach, FL 33140

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

RE:Corporation Reinstatement

Document#P99000043670

Dear Sir,

Enclosed is your form to reinstate our corporation completed.

No business was transacted until 9/1/00 when we opened our business.

Due to the change of our address and our new Registered Agent we never received any documents from the State until our new Registered Agent received this notification.

I was advised by your office to enclosed this letter of exclamation and our check for reinstatement. Our new mailing address, corporate and Registered Agent address together with our new FEI number is included in your form.

Please update our file. Thank you.

Sincerely,



Bernard D.Hutman, President and Director

FIRST ATLANTIC GROUP, INC

BDH:/ bsh