

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

01 NOV 14 AM 11:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000062138

1. Corporation Name

EC Investment Services, Inc.

2. Principal Office Address

4262 Northlake Blvd.

Suite, Apt. #, etc.

# 201

City & State

Palm Beach Gardens, FL

Zip

33410

Country

USA

3. Mailing Office Address

4262 Northlake Blvd.

Suite, Apt. #, etc.

# 201

City & State

Palm Beach Gardens, FL

Zip

33410

Country

USA

2000-2001 UBR

4. Date Incorporated or Qualified  
To Do Business in Florida

07/15/99

5. FEI Number

65-0940264

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

Ernest D. Ganz

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

4262 Northlake Blvd., ...

Suite, Apt. #, Etc.

# 201

City

Palm Beach Gardens

800004732898-6

-12/19/01-01049-005

\*\*\*300.00 \*\*\*300.00

State

FL

Zip Code

33410

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

Ernest D. Ganz

Date

11 19 01

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
Pres.	Ernest D. Ganz	4262 Northlake Blvd.	Palm Beach Gardens, FL 33410
Tres.	Christine A. Ganz	4262 Northlake Blvd.	Palm Beach Gardens, FL 33410

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 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:

Ernest D. Ganz Ernest D. Ganz 11 19 01 561-841-2907

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/00)