

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 27 PM 12:52

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P99000075690

1. Corporation Name

OCEANSIDE MOTORCARS INC.

Principal Place of Business

Mailing Address

~~4205 SOUTH FEDERAL HIGHWAY~~
~~STUART FL 34937~~

~~4205 SOUTH FEDERAL HIGHWAY~~
~~STUART FL 34937~~



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

4. Date Incorporated or Qualified
To Do Business in Florida

08/24/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

File Number

65-0943577

Applied For

Not Applicable

4800 N. Federal Hwy, #200-E

4800 N. Federal Hwy, #200-E

City & State

City & State

Boca Raton, FL

Boca Raton, FL

Zip Country

Zip Country

33431

Palm Beach

33431

Palm Beach

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)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director 3 | City / State / Zip 4 |
|---------------|---|--|-------------------------|
| P/D | SORKIN, JERRY | 20310 FAIRWAY OAKS DR., #151 | BOCA RATON FL 33434 |
| V/D | ELK, LARRY | 31150 AINSWORTH | PEPPER PIKE OH 44124 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

500009241965
11/27/02--01074--017 **300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ELK, SCOTT A
4800 N FEDERAL HWY STE 200-E
BOCA RATON FL 33431

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 11/26/2012

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/20/2012
Date

440-449-1000
Daytime Phone #

CR2040 (8/02)

OCEANSIDE MOTORCARS, INC.
4800 NORTH FEDERAL HIGHWAY
SUITE 200-E
BOCA RATON, FL 33431

November 26, 2002

Secretary of State
Division of Corporations
Annual Report / Reinstatement Section
409 East Gaines Street
Tallahassee, FL 32399

RE: Oceanside Motorcars, Inc., Document No. 99000075690

Dear Sir/Madam:

Please be advised that the Corporate Annual / Uniform Business Reports for the above referenced corporation were never received for the past two (2) years, probably due to an address change. This correspondence shall request the reinstatement of Oceanside Motorcars, Inc. I have enclosed two (2) checks in the amount of \$150.00 each, representing the required filing fee for same.

Thank you for your courtesy and cooperation with regard to this matter. Should you have any questions with respect to the foregoing, please do not hesitate to contact me.

Sincerely,

OCEANSIDE MOTORCARS, INC.

BY: 

LARRY ELK, DIRECTOR