

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 13 AM 9:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000092648

1. Corporation Name

DIMEOLA & COMPANY, INC.

Principal Place of Business

Mailing Address

~~47700 LITTEN DRIVE~~
BOCA RATON FL 33498

~~47700 LITTEN DRIVE~~
BOCA RATON FL 33498

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

2. New Principal Office Address, If Applicable

17798 LITTEN DRIVE

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

17798 LITTEN DRIVE

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/21/1999

5. FEI Number

65-0960736

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)

| Title(s) 1 | Name of Officers and/or Directors 2 | Street Address of Each Officer and/or Director 3 | City / State / Zip 4 |
|---------------|---|--|-------------------------|
| DPST | DIMEOLA, RICHARD | 47700 LITTEN DRIVE 17798 | BOCA RATON FL 33498 |
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700023752477

10/13/03--01074--017 **158.75

8. Name and Address of Current Registered Agent

BLODIG, GREGORY J ESQ
GREENSPOON MARDER HIRSCHFELD ET AL
100 WEST CYPRESS CREEK ROAD SUITE 700
FT LAUDERDALE FL 33309

9. Name and Address of New Registered Agent

Name

STEVEN R. BLECKER

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

BLECKER, LEWINGER + CO

Suite, Apt. #, Etc.

SUITE 306, 6600 N. ANDREWS AV.

City

FT. LAUDERDALE

State

FL

Zip Code

33309

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

STEVEN R. BLECKER

REGISTERED AGENT MUST SIGN

Date

10/10/03

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:

RICHARD L. DIMEOLA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

DiMeola & Company, Inc.

17798 Litten Drive

Boca Raton, Florida 33498

e-mail: dimeola@dimeola.com Phone: 561-488-1798 Fax: 561-488-1719

October 10, 2003

Florida Department of State
Glenda E. Hood
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Madam:

Enclosed is the form for the reinstatement of this corporation, DiMeola & Company, Inc.

We wish to state that we did not receive the uniform business report (UBR), possibly because of an incorrect address in your records. We have corrected the address on the enclosed form.

We have also changed our Registered Agent and have so indicated this in the form.

We enclose a check in the amount of \$158.75 representing \$150 filing fee and \$8.75 for a certificate of status.

Very truly yours,



Richard L. DiMeola
Chairman