

CAPITAL CONNECTION

850 222 1222

08/26 '98 11:48 NO.253 02/02

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

98 AUG 27 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 518399

1. Corporation Name

M.C.W. Consultants, Inc.

Principal Place of Business

Mailing Address

5424 Pine Tree Drive
Miami Beach, FL 3314024 S.W. 18th Road
Miami, FL 33129-1502

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

12/14/90

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0240184

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐\$7.75 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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	Pendergast, Mary Claire	5424 Pine Tree Drive	Miami Beach, FL 33140
D	Morton, James A.	220 Cleary Road	West Palm Beach, FL 33413

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-09/01/98--01068--015
***1658.75 ***1658.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Corporation Company of Miami
100 Chopin Plaza
1600 Miami Center
Miami, FL 33131

Name

Richard T. Davis, Esquire

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

250 Australian Avenue South

Suite, Apt. #, Etc.

One Clearlake Centre, Suite 1601

City

West Palm Beach

State

FL

Zip Code

33401-5016

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

Richard T. Davis

REGISTERED AGENT MUST SIGN

Date 8/26/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.Yes ☐ No ☐(See other side for information
on intangible tax.)

12. 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)(f), 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

8/26/98

Date

561/6595522

On-time Phone #