

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 98-99 AR 596810

1. Corporation Name

MOBIL OPHTHALMIC SERVICES
INC.

Principal Place of Business

Mailing Address

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

2. New Principal Office Address, If Applicable

7815 PENWOOD CT

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

LAKE WORTH, FL

City & State

Zip

33467

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0296981

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)

Name of Officers
and/or Directors

Street Address of Each
Officer and/or Director
(Do NOT Use Post Office Box Numbers)

City / State / Zip

PRES EDWARD S. LAMBERT

7815 PENWOOD CT
LAKE WORTH, FL 33467

400003010324--2
-10/08/99--01030--003
****300.00 ****300.00

98-99 ITS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Edward S. Lambert
7815 Penwood Court
Lake Worth, FL 33467

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.

Signature of
Registered Agent

Edward S. Lambert

REGISTERED AGENT MUST SIGN

Date 8-30-99

11. This corporation owes 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)(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:

Edward S. Lambert

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-27-99 561 7143348

Date

Daytime Phone #

CR2E08 (12/98)

HARRY J. ROSS
ADMITTED IN
FLORIDA & D.C.

RICHARD P. COHN

LAW OFFICES OF
HARRY J. ROSS
6100 GLADES ROAD
SUITE 211
BOCA RATON, FL 33434

(561) 482-2400
FAX: (561) 482-2802

October 1, 1999

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

Re: Mobile Ophthalmic Services, Inc.
Document No. S96810

Dear Mr. Scott:

This letter shall serve to confirm our conversation that Mobile Ophthalmic Services, Inc. has resubmitted herewith, its reinstatement documentation together with a check made payable to the Department of State in the amount of \$300.00. On the reinstatement document itself, Mr. Lambert will continue to remain as the registered agent, and his signature appears in block 10.

On behalf of Mobil Ophthalmic Services, Inc., Mr. Lambert is requesting that the Department of State waive any additional funds over and above the \$300.00 dollar reinstatement fee to reinstate the subject corporation. Mr. Lambert has advised me that any renewal documentation prior to the reinstatement had not been received by his business. Therefore, there was no notice of the time and amounts due for making payments for any prior year. Therefore, the corporation fell into an inactive status and finally into one of dissolution.

Mr. Lambert recognizes that if approved, the Florida Department of State will grant this specific corporation a one-time waiver. To that extent, Mr. Lambert can assure you that he will now allow this corporation to become delinquent in any monies owed to the Florida Department of State.

Thank you for your prompt attention to this matter. Please forward the appropriate reinstatement document for Mobile Ophthalmic Services, Inc. indicating that it is now an active Florida corporation on the books and records of this State.

Yours truly,


HARRY J. ROSS

HJR:bs

Encls.

cc: E. Lambert