

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

04 MAR 11 PM 12:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #**

1. Corporation Name

IBK Investment & Management, Inc.  
Doc # V08958

**REINSTATEMENT** 02-04

700028435907  
02/09/04--01058--022 \*\*758.75

2. Principal Office Address

400 New York Avenue

3. Mailing Office Address

P.O. Box 878

Suite, Apt. #, etc.

Suite 105

Suite, Apt. #, etc.

City & State

Winter Park, Florida

City & State

Winter Park, Florida

Zip

32789

Country

USA

Zip

32790

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

01/22/1992

5. FEI Number

593106625

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$5.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

Ira B. Kitograd

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

400 New York Avenue

Suite, Apt. #, Etc.

Suite 105

City

Winter Park

State

FL

Zip Code

32789

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

Date

1/28/04

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
P/D	Ira B. Kitograd	<del>922 Bonita Drive</del> 400 N. NEW YORK Ave Ste 105	Winter Park, Florida 32789

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:

Ira B. Kitograd, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/28/04 (1407)

Daytime Phone #

599-6996

CR2061 (10/02)

IBK INVESTMENTS & MANAGEMENT  
P. O. BOX 878  
WINTER PARK, FL 32790

March 8, 2004

Florida Dept. of State  
Justin M. Shivers

RE: Document V08958

Dear Mr. Shivers:

IBK Investments & Management DID NOT RECEIVE THE ORIGINAL 2002  
DOCUMENT.

I was instructed to write this letter to you in order for you to complete the reinstatement  
of the corporation. Additionally, refund the amount of the overpayment. I had submitted  
\$758.75 and the reinstatement fee due was \$458.75.

Please complete the above process and refund the overpayment.

Thanking you in advance,



Ira B. Kitograd  
President