

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katharine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 OCT 25 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V17814

1. Corporation Name

SG DESIGNS, INC.

Principal Place of Business

6368 NW 23RD WAY
BOCA RATON FL 33496

Mailing Address

6368 NW 23RD WAY
BOCA RATON FL 33496

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

2. New Principal Office Address, If Applicable

2115 South Ocean Boulevard

Suite, Apt. #, etc.

#2

City & State
Delray Beach, FL

Zip
33483

Country
USA

3. New Mailing Office Address, If Applicable

2115 South Ocean Boulevard

Suite, Apt. #, etc.

#2

City & State
Delray Beach, FL

Zip
33483

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

02/27/1992

5. FEI Number

65-0319557

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	GREENHUT, STEVEN E Greenhut, Steven E	2115 SOUTH OCEAN BOULEVARD #2 #1	DELRAY BEACH FL 33483
ST	GREENHAT, GLORIA	6368 NW 23 WAY	BOCA RATON FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GREENHUT, STEVEN E.
2115 SOUTH OCEAN BOULEVARD
#2
DELRAY BEACH FL 33483

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

REGISTERED AGENT MUST SIGN

Date

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/21/99

Date

561-265-2654

Daytime Phone #

KE

CR2E040 (9/99)

2



GOLDSTEIN LEWIN & CO.
Certified Public Accountants

October 21, 1999

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL. 32314-6327

Re: SG Designs
FEI# 65-0319557

Dear Sir or Madam:

As the accountants for the above referenced corporation, we have been asked to respond to your Notice of Dissolution.

The corporation did not receive their Annual Report. The President of the corporation was divorced from his wife. She did not forward the mail to him.

We request that you reinstate the Corporation. Please find enclosed a check for the \$150 fee.

Sincerely,

GOLDSTEIN LEWIN & CO.
Certified Public Accountants

Sandra J. Weiner
Sandra J. Weiner, CPA

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