

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

DOCUMENT # V37908

1. Corporation Name

STOCK DEPOT, INC.

Principal Place of Business

1047 E ATLANTIC AVE
SUITE 244
DELRAY BCH. FL 33483
US

Mailing Address

9 HUDSON AVENUE
OCEAN RIDGE FL 33435

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

05/21/1992

5. FEI Number

65-0382711

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
P	MANGIONE, ERIC	9 HUDSON AVE	OCEAN RIDGE FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MANGIONE, ERIC J.
9 HUDSON AVENUE
OCEAN RIDGE FL 33435

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

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

APPROVED
AND
FILED

98 DEC 23 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

98 DEC 4



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CR20040 (8/95)

STOCK DEPOT

DEERFIELD BEACH • BOCA RATON • DELRAY BEACH • BOYNTON BEACH

Member, NASD, SIPC, MSRB • 1047 E. Atlantic Avenue • Delray Beach, FL 33483 • 561-276-6004 • (800) 774-6004 • Fax (561) 243-8323

12/3/98


Dear State of Fla:

Please call me so we can clear this matter up immediately. I paid my annual corporate fee and can produce a cancelled check if needed. I also sent you a copy of the enclosed 1997 tax report.

I have requested several times that my address be changed to the business address above. I no longer live at Hudson ave. and missed any communications you may have sent me there.

If you need anything else please let me know but I don't think the penalty imposed is fair since I did what I thought I should do and you did not have my correct address (with all due respect).

Thank You,



Dr. Eric Mangione

38 DEC 4 ALL: 42

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DATE: 12/21/98

TO: MR. SEAN TONER

FROM: ERIC MANGIONE

RE: CORP. TAX

98 DEC 21 PM 2:37

Thank you for your prompt response. Enclosed is a check for \$150. I am searching for the other cancelled check copy. I believe we have you on our annual audit list (copy will be sent this year).

When I find the other check we can apply this is 1999. Thanks again for your help.

Sincerely,



Dr. Eric J. Mangione