C-9021
(10-99, R-4)

State of New Jersey - Division of Taxation

APPLICATION FOR REINSTATEMENT OF CORPORATE CHARTER

Mail To: State of New Jersey
Department of The Treasury
Division of Taxation
Corporate Services Audit Group
PO Box 277
Trenton, NJ 08695-0277

Fax To: Corporate Services Audit Group
(609) 292-3467

This form is to be used to permit the Director of the Division of Taxation to release information pertaining to the reinstatement of a corporation's charter to the authorized representatives of subject corporation. The following information is submitted in order to avoid inordinate delays in the reinstatement process. Please type or print clearly.

Complete Name of Corporation:_____

Trade Name (if any):_____

Business Address: _____

_____

Corporation Serial Number:_____

Federal Identification Number: _____

Date and State of Incorporation: _____

Date Charter Declared Void: _____

Nature of Business: _____

Does Corporation hold Title to Real Estate? _____ If so, when acquired? _____

Does Corporation derive income from the rental of such property? _____

Corporation Status (check one): ☐ ACTIVE ☐ INACTIVE

Permission is hereby granted to release any information regarding the above corporation necessary to facilitate the reinstatement of the corporation's charter to the agent named below:

_____ _____
Name Relationship to Corporation

_____
No. Street

_____
City State Zip Code

Telephone Number: (_____)_____
Area Code Number

_____
Authorized Signature Corporate Officer Title Date