

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Catherine Harris  
Secretary of State  
DIVISION OF CORPORATION

FILED

99 OCT 21 AM 11:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000050026

1. Corporation Name

ATLANTIC MACHINERY & PARTS, INC.

Principal Place of Business

Mailing Address

240 S.E. 14TH STREET (SUITE #30)  
MIAMI FL 33131

240 S.E. 14TH STREET (SUITE #30)  
MIAMI FL 33131

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

4. Date Incorporated or Qualified  
To Do Business in Florida

06/04/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. FEI Number

650845024

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
President	Eric O. Scherr	240 SE. 14TH ST (#30)	MIAMI, FLORIDA 33131

600003032506--6  
-11/02/99--01070--024  
\*\*\*\*150.00 \*\*\*\*150.00

8. Name and Address of Current Registered Agent

SCHERR, ERIC O  
19355 TURNBERRY WAY #11D  
AVENTURA FL 33180

9. Name and Address of New Registered Agent

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

*Eric Scherr* / President

REGISTERED AGENT MUST SIGN

Date

10/19/99

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)(l), 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:

*Eric Scherr* / President Eric Scherr

Date

10/19/99

Daytime Phone #

(305)371-3406

KE

CR2E040 (8/98)

**ATLANTIC MACHINERY & PARTS, INC.**

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October 19, 1999

**Division of Corporations**  
P.O. Box 6327  
Tallahassee, Fl. 32314-6327

Dear Sir/Madam:

As per our telephone conversation on October 19 1999. Regarding the notice of administrative dissolution or revocation I received. This was the first notice of any kind sent to us from your office. We have expected the annual filing report before June 1st 1999 and have not received. Consequently we had called your office regarding the matter and were told it would arrive by mail.

At this time this notice was the first to arrive.

As instructed by your office during today's telephone conversation I have enclosed a check for the amount of \$150.00 .

Best Regards,  
Eric O. Scherr  
Atlantic Machinery & Parts, Inc.

A handwritten signature, likely of Eric O. Scherr, is written below the typed name.