

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 DEC -7 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J35817

1. Corporation Name

JOE GRENAIER CONSTRUCTION CO., INC.

Principal Place of Business

Mailing Address

2200 NW 32ND ST.
400
POMPANO BCH FL 33069
US

3260 N.W. 23RD AVENUE, SUITE 1500
POMPANO BCH FL 33069

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

09/29/1986

5. FEI Number

59-2732437

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PS	GRENAIER, JOSEPH	4144 NW 67TH WAY	CORAL SPRINGS FL 33067

800002709668--6
-12/11/98--01004--024
****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ESPOSITO, GREGORY F
8000 WILES ROAD, SUITE 9
CORAL SPRINGS FL 33309

Name

BERNARD F. L. GRENAIER

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

4144 NW 67th Way

Suite, Apt. #, Etc.

City

CORAL SPRINGS

State

FL

Zip Code

33067

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

Bernard F. L. Grenier
REGISTERED AGENT MUST SIGN

Date

11/3/98

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:

JOSEPH L. GRENAIER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/3/98 (654) 970-3177

CR2E040 (9/98)