

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -1 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 456012

1. Corporation Name

B & K WELDING & FABRICATING, INC.

Principal Place of Business

4449 N.W. 9TH AVE.
FT. LAUDERDALE FL 33309
US

Mailing Address

4449 N.W. 9TH AVE.
FT. LAUDERDALE FL 33309

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/24/1974

5. FEI Number

59-1547558

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
PD	CANNATO, KENNETH G	4449 NW 9TH AVE.	FT LAUDERDALE FL
SD	CANNATO, SHERRELL	4449 NW 9TH AVE.	FT LAUDERDALE FL

100008765561

11/01/02--01104--015 **150.00

8. Name and Address of Current Registered Agent

CANNATO KENNETH
4449 NW 9TH AVE.
FT LAUDERDALE FL 33309

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

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

OCT 29, 2002

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

OCT 29, 2002.

Daytime Phone #

October 29, 2002.

TO WHOM IT MAY CONCERN.

I, KENNETH LANNATO of B & K welding and
FABRICATING. would like to inform you
THAT I, ~~was~~ never. Received the ORIGINAL
forms for my corporation. I HAVE BEEN
IN BUSINESS for 28 years. AND HAVE NEVER
HAD THIS PROBLEM BEFORE

Thank you
KENNETH LANNATO