

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

97 DEC 17 PM 4:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 543565

1. Corporation Name

BUHL DEL SOL, INC.

Principal Place of Business

2654 70TH AVE SOUTH  
ST PETERSBURG FL 33712

Mailing Address

2654 70TH AVE SOUTH  
ST PETERSBURG FL 33712

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

2. New Principal Office Address, If Applicable

4116 8TH AVE SOUTH

Suite, Apt. #, etc.

City & State

ST. PETERSBURG FL.

Zip

33711

Country

3. New Mailing Office Address, If Applicable

1009 BEECH AVE

Suite, Apt. #, etc.

City & State

PITTSBURGH PA.

Zip

15233

Country

AMERICAN

4. Date Incorporated or Qualified  
To Do Business in Florida

08/22/1977

5. FEI Number

25-1332714

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	STAPSY, IRVING - DECEASED.	2554 70TH AVE S	ST PETERSBURG, FL 00000
<del>PD</del>	<del>LINKHORST, JOHN</del>	<del>1009 BEECH AVE</del>	<del>ST PETERSBURG, FL 33711</del>
M	LINKHORST, JOHN	4116 8th AVE. S.	ST. PETERSBURG, FL 33711
P	CARACCILO, FRANK	4116 8TH AVE S.	ST. PETERSBURG, FL 33711

REINSTATEMENT

97

12-19-97

8. Name and Address of Current Registered Agent

STAPSY, IRVING  
2554 70TH AVE  
ST PETERSBURG, FL  
33712

400002380654-6  
-12/23/97-01063-025  
\*\*\*\*750.00 \*\*\*\*750.00

9. Name and Address of New Registered Agent

Name  
JOHN T. LINKHORST, SR.  
Street Address (P.O. Box Number is Not Acceptable)  
4116 8TH AVE. SOUTH.  
Suite, Apt. #, Etc.

City

ST. PETERSBURG

State

FL

Zip Code

33711

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

J. T. Linkhorst SR.  
REGISTERED AGENT MUST SIGN

Date OCT. 31. 97

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)(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:

Frank Caracciolo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/12/97

Date

412-321-0076

Daytime Phone #

CR20040 (8/97)