

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

1997 AUG 29 PM 4:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 544904

1. Corporation Name

SUN MANOR CORPORATION

Principal Place of Business

Mailing Address

333 OKLAHOMA ST
HOLLYWOOD FL 33019

333 OKLAHOMA ST
HOLLYWOOD FL 33019

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

3912 NW 2ND COURT
Suite, Apt. #, etc.

3912 NW 2ND COURT
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

09/09/1977

5. FEI Number

59-1761168

Applied For

Not Applicable

City & State

DEERFIELD BEACH FL

City & State

DEERFIELD BEACH FL

Zip

33442

Country

USA

Zip

33442

Country

USA

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
PD	LANDRY, ROGER	3912 NW 2ND COURT	DEERFIELD BEACH FL 33442
STD	LANDRY, YVETTE	3912 NW 2ND COURT	DEERFIELD BEACH FL 33442
VP	LANDRY		000002203259--7 09/02/97--01187--004 ****\$15.00 ****\$15.00
PP	OLSEN, JOSEE	3912 NW 2ND COURT	DEERFIELD BEACH FL 33442

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LANDRY ROGER
333 OKLAHOMA STREET
HOLLYWOOD FL 33009

Name

OLSEN JOSEE

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

3912 NW 2ND COURT

Suite, Apt. #, Etc.

City

DEERFIELD BEACH

State

FL

Zip Code

33442

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

JOSEE OLSEN

REGISTERED AGENT MUST SIGN

Date 8-22-97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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: JOSEE OLSEN

JOSEE OLSEN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

954 4986935

Daytime Phone #

CR20040 (12/96)