

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 NOV 30 AM 11:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 560396

1. Corporation Name

SUNSHINE SPRINKLER SYSTEMS, INC.

Principal Place of Business

Mailing Address

SUNSHINE SPRINKLER SYSTEMS, INC.
CORAL SPRINGS FL 33065
US

3697 NW 124 AVENUE
CORAL SPRINGS FL 33065
US

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

02/23/1978

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-1806332

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
STD	PANZER, SUSAN MICHELE	3697 NW 124 AVENUE	CORAL SPRINGS FL
PD	PANZER, RAY SCOTT	3697 NW 124 AVENUE	CORAL SPRINGS FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PANZER, RAY SCOTT
3697 NW 124 AVENUE
CORAL SPRINGS FL 33065

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-25-98 954-752-6661
Date Daytime Phone #

CR2040 (9/98)

Sunshine Sprinkler Systems, Inc.

3697 N.W. 124 Avenue
Coral Springs, Florida 33065
(954) 752-6661 • (954) 752-6668

2012

November 25, 1998

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: DOCUMENT NO. 560396
ANNUAL CORPORATION REPORT
SUNSHINE SPRINKLER SYSTEMS, INC.

To Whom It May Concern:

Please be informed that I contacted your office on Tuesday, November 24, 1998, after receiving the enclosed papers for the annual corporation report, Document No. 560396, and explained to your representative that I never received these papers in February 1998.

I have been in business for twenty years and always sent in my fees for this report. Kindly accept the annual renewal fee of One Hundred Fifty (\$150.00) Dollars for the annual corporation report.

Thank you, in advance, for your cooperation to this matter.

If you have any questions, please do not hesitate to contact the undersigned.

Very truly

Sunshine Sprinklers Systems, Inc.



Ray S. Panzer
President

RSP/eb
Enclosure: Check/\$150.00