

TEAR HERE

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APPLICATION
FOR
REINSTATEMENT
FOR

FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

99 FEB 16 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDARead Instructions on Other Side Before Making Entries
Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT # 615185

Beach & University Shell, Inc.
5800 Phillips Highway
Jacksonville, Florida 32216

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address

Address

City and State

Zip Code

3. Date Incorporated or Qualified
To Do Business in Florida 3/23/79

4. FEI Number 59-2748375

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Names of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
PD	Nehme A. Richa	5800 Phillips Highway	Jacksonville, Florida 32216
VD	Andre A. Richa	5800 Phillips Highway	Jacksonville, Florida 32216
			2000027285.02--9 -02/17/99--01075--030 ***1983.75 ***1983.75
			2000027285.02--9 -02/17/99--01075--031 *****8.75 *****8.75
			REINSTATEMENT 2/16/99

REGISTERED AGENT INFORMATION

7. Name and Address of New Registered Agent

Name

Daniel D. Akel, Esquire

Street Address (Do NOT Use P.O. Box Number)

One Independent Drive, Suite 2301

Street Address (Do NOT Use P.O. Box Number)

City and State

Jacksonville

FL.

Zip Code

32202

6. Name and Address of Current Registered Agent

Nehme A. Richa
3244 University Boulevard South
Jacksonville, Florida 32216

8. 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

DANIEL D. AKEL

REGISTERED AGENT MUST SIGN

Date

2-15-99

9. 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., and that all fees owed by the corporation have been paid. 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 of
Officer or Director

ANDRE RICH, Vice President

Date 2/12/99

Phone #

(904) 737-6455

Typed or printed name of signing officer or director

10. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee
required for a
Certificate of Status