

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
TAMM M. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 APR 17 AM 5:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 695862

1. Corporation Name
S.B.P. Enterprises, Inc.

Principal Place of Business Mailing Address
1001 Bern Creek Loop 1001 Bern Creek Loop
Sarasota, FL 34240 Sarasota, FL 34240

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		072381	
City & State		City & State		5. FEI Number	
Zip		Zip		69-2119107	
Country		Country		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
PD	Sally B. Place	1001 Bern Creek Loop	Sarasota, FL 34240
			700002513827--5
			05/06/98 01099 003
			****315.00 ****315.00
			SL
			4-22-98

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Sally B Place 1001 Bern Creek Loop Sarasota, FL 34240		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL	

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 Sally B Place REGISTERED AGENT MUST SIGN Date Apr 9, 1998

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: Sally B Place Sally B. Place 4/9/98 941-342-8162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (1/98)

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SBP ENTERPRISES, INC.
1001 BERN CREEK LOOP
SARASOTA, FL 34240

March 25, 1998

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

It came to my attention during my recent tax appointment with my accountant that I never filed a 1997 Corporation Annual Report. We have moved twice in the last 18 months and never received a notice.

In speaking with Sean from your office on 02/27/98, his recommendation was to copy an old form, update it to reflect 1997 and 1998 returns, sign and return with \$165 for 1997 and \$150 for 1998. I hope this will reinstate my Corporate status. Thank you.

Sincerely,

Sally B Place

Sally B. Place
SBP Enterprises, Inc.
941-342-8162

P.S. Please change my address for future mailings.