

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 OCT -1 AM 9:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F98000003432

1. Corporation Name

Southgate Tampa Industrial, Inc.

400004629284--9

-10/10/01--01030--004

\*\*\*\*150.00 \*\*\*\*150.00

2. Principal Office Address

% Quadrelle Realty - SAME

3. Mailing Office Address

Suite, Apt. #, etc.

1 West Ave

Suite, Apt. #, etc.

City & State

Larchmont NY

City & State

Zip

10538

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

52-2104828

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

BRUDERMAN, ROBERT

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

SSI NW 77th St

Suite, Apt. #, Etc.

100

City

Boca Raton FL 33487

State

FL

Zip Code

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CP	LANG, BARRY	5980 E. TERRA GRANDE	TUCSON AZ 85750
UCV	WENDEL, GERALD	215 S. Monarch St	Aspen Co. 81611
TD	Lichter, Stuart	4300 VIA ALONDRA	PALOS VERDES Estates CA 90207
AS	BERGMAN, THOMAS	525 Vine St.	CINCINNATI OH. 45202
		TS	
			DI UBR

10. 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

Date

Daytime Phone #



QUADRELLE  
REALTY  
SERVICES

MANAGEMENT  
LEASING  
SALES  
CONSULTANTS

**September 28, 2001**

**Mr. Scott  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314**

**RE: Uniform Business report for Southgate Tampa Ind. Inc.**

**Dear Mr. Scott:**

**Enclosed is check # 2416 in the amount of \$150.00 along with the Reinstatement form for the above captioned Corporation.**

**We never received the Uniform Business Report sent earlier this year and would like for the late charge to be waived under these circumstances.**

**Thank you for attention in this matter.**

**Yours truly,**

**Quadrelle Realty Services**

**Alfi Schiaroli**