

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAR 21 PM 2:32

DOCUMENT # G03462

1. Corporation Name

RICHARD J. BETAR, INC.

2. Principal Office Address

333 N. TROPICAL TRAIL (SAME AS 2.)

Suite, Apt. #, etc.

201

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

MERRITT ISLAND, FL

City & State

Zip

32953

Country

USA

Zip

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 10/06/1982

5. FEI Number

59-2236625

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

RICHARD J. BETAR

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

333 TROPICAL TRAIL

Suite, Apt. #, Etc.

201

City

MERRITT ISLAND,

State

FL

Zip Code

32953

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

Richard J. Betar

Date 2-24-05

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
PD	RICHARD J. BETAR	333 N. TROPICAL TRAIL, M.I., FL.	32953
VD	MARK W. BETAR	333 N. TROPICAL TRAIL	MERRITT ISLAND FL 32953
STD AD	GRETA W. BETAR	333 N. TROPICAL TRAIL	MERRITT ISLAND, FL 32953

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.

RICHARD J. BETAR

SIGNATURE:

Richard J. Betar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-05

Date

(321)
452-3306

Daytime Phone #

CR2E081 (01/04)