

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
 Katherine Harris  
 Secretary of State  
 DIVISION OF CORPORATIONS



DOCUMENT # **JO 1628**

1. Corporation Name  
**STEAK HOUSE CONSTRUCTION CORPORATION**

Principal Place of Business: **2113 Florida Blvd. Neptune Beach, FL 32266**  
 Mailing Address: **2113 Florida Blvd. Neptune Beach, FL 32266-1808**

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

3. New Mailing Office Address, If Applicable  
 Suite, Apt. #, etc.  
 City & State  
 Zip Country

FILED  
 99 FEB 19 PM 3:32  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**REINSTATEMENT**

*Handwritten:* 08-09-99, 2/19/99

4. Date Incorporated or Qualified To Do Business in Florida: **02/27/1986**

5. FEI Number: **59-2730457**

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PD	Christman, Jr., Lewis E.	2113 Florida Blvd.	Neptune Beach, FL 32266
DV	Alexander, Edward B.	2113 Florida Blvd.	Neptune Beach, FL 32266
Sec	Garrett, William	2113 Florida Blvd	Neptune Beach, FL 32266

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 \*\*\*\*900.00 \*\*\*\*900.00

B. Name and Address of Current Registered Agent  
**Alexander, Edward B.**  
**2113 Florida Blvd.**  
**Neptune Beach, FL 32266**

9. Name and Address of New Registered Agent  
 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: *Edward B. Alexander*  
 REGISTERED AGENT MUST SIGN  
 Date: **2-18-99**

11. This corporation owes 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: *Edward B. Alexander*  
**Edward B. Alexander, Vice President**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date: **2/18/99**  
 Daytime Phone #: **(904) 249-4197**

CR2E081 (12-98)