

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 20 AM 9:13

DOCUMENT # J06175

1. Corporation Name

HOSS' DISCOUNT ALUMINUM & BUILDERS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2625 SE HWY 441
2345 S.E. HWY. 441
OKEECHOBEE FL 34974
US

2626 SE HWY 441
OKEECHOBEE FL 34974
US

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

2625 SE HWY 441

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

OKEECHOBEE, FL

Zip

Country

Zip

Country

34974

OKEECHOBEE

4. Date Incorporated or Qualified
To Do Business in Florida

03/26/1986

5. FEI Number

59-2677040

Applied For

Not Applicable

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	GARRIS, JAMES B.	2625 SE HWY 441	OKEECHOBEE FL
SEC.	GARRIS, CHAROLETTE J.	2625 SE HWY 441	OKEECHOBEE, FL

000023956890

10/20/03--01057--012 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GARRIS, JAMES B.

~~2625 SE HWY 441~~ 2901 SE 47th TERR
OKEECHOBEE FL 34974

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

34974

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE

Date

REGISTERED AGENT MUST SIGN

11. 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

Charolette J. Garriss 10/14/03 863/763-6699

Date

Daytime Phone #

CR2E040 (7/03)

Hoss' Discount Aluminum
& Builders, Inc.
2625 Hwy 441 S.E.
Okeechobee, Fl 34974-7329
Ph: 863-763-6699
Fax: 863-763-9900

Date: October 14, 2003

Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

DOCUMENT #J06175

To Whom It May Concern:

Our office spoke with Ms Kathy Ashton of the Department of State on October 14, 2003. She informed us that our first and second notices were returned because of the wrong address. Above is our correct address. Our address is correct on the principal place of business but incorrect on the mailing address.

Please except our check with the completed papers.

Sincerely,

A handwritten signature in cursive script, appearing to read "Charolette J. Garris".

Charolette J. Garris
Secretary