

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
~~REINSTATEMENT~~



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # J40559

1. Corporation Name

A.A.A. BAIL BONDS INC.

Principal Place of Business

7726 LITTLE RD
NEW PORT RICHEY FL 34654
US

Mailing Address

7726 LITTLE RD.
NEW PORT RICHEY FL 34654
US

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

4. Date Incorporated or Qualified
To Do Business in Florida

10/31/1986

5. FEI Number

59-2798442

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)

Name of Officers
and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

PD

MALONEY, FRANCIS J

7726 LITTLE RD.

NEW PORT RICHEY FL 34645

STD

MALONEY, KATHLEEN P

7726 LITTLE RD

NEW PORT RICHEY FL 34654

400008635774

10/28/02--01112--020 **150.00

400008635774

11/22/02--01085--023 **400.00

8. Name and Address of Current Registered Agent

MALONEY, FRANCIS J
7730 LITTLE RD.
NEW PORT RICHEY FL 34654

9. Name and Address of New Registered Agent

Name

Same

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 607.0535, F.S. or 617.0535, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/20/02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/20/02 727-849-2245

FILED

02 NOV -6 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



2002 UBR

CR2E040 (8/02)

282

AAA BAIL BONDS INC
7726 Little Road
New Port Richey, Florida 34654
(727) 849-2245
fax: (727) 849-0068
October 23, 2002

To Division of Corporations, Department of State

The undersigned, president of AAA Bail Bonds, Inc., did not receive a second notice of dissolution of this corporation. Enclosed, please find \$150 for the filing fee for 2002 for this corporation.

Sincerely,



Francis J. Maloney
President of AAA Bail Bonds, Inc.
727-849-2245