

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAR 10 PM 4:33

SECRETARY OF STATE  
TALLAHASSEE, FL 32304

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J 44187

1. Corporation Name

LINET BUILDING, INC.

2. Principal Office Address

1899 N.E. 164TH STREET

Suite, Apt. #, etc.

City & State

N. MIAMI BEACH, FL

Zip

33162-4109

Country

MIAMI-DADE

3. Mailing Office Address

1300 N. FEDERAL HIGHWAY

Suite, Apt. #, etc.

SUITE 212

City & State

BOCA RATON, FL

Zip

33432

Country

PALM BEACH

4. Date Incorporated or Qualified  
To Do Business in Florida

11/25/1986

5. FEI Number

65-2765708

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

HARRY LINET

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

1899 N.E. 164 STREET

Suite, Apt. #, Etc.

City

N. MIAMI BEACH

State

FL

Zip Code

33162-4109

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

*Harry Linet*

REGISTERED AGENT MUST SIGN

Date

March 4, 2003

**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
D	HARRY LINET	1899 N.E. 164 STREET	NORTH MIAMI BEACH, FL 33162
D	RHONDA LINET	1450 SHORELINE WAY	HOLLYWOOD, FL 33019

REINSTATEMENT 93-03

000013739270

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:

*Harry Linet*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

March 4, 2003

Daytime Phone #



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 960467 4336896

AUTHORIZATION :

*Patricia Pigante*

COST LIMIT : \$ 2,250.00

ORDER DATE : March 10, 2003

ORDER TIME : 2:06 PM

ORDER NO. : 960467-005

CUSTOMER NO: 4336896

CUSTOMER: Ms. Amy E. Schultz  
Thaler & Thaler, P.a.  
700 North Olive Avenue

West Palm Beach, FL 33401

DOMESTIC FILINGS

NAME: LINET BUILDING, INC.

\*\*\*\*\*FILE 1ST\*\*\*\*\*

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
03 MAR 10 PM 3:59  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA