

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 NOV 21 PM 3:45

DOCUMENT # J64232

1. Corporation Name

BBB ROOFING & SHEET METAL WORKS, INC.

Principal Place of Business

Mailing Address

% BARBARA LAGARES  
6700-23RD STREET NORTH  
ST PETERSBURG FL 33702

% BARBARA LAGARES  
6700-23RD STREET NORTH  
ST PETERSBURG FL 33702

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

4. Date Incorporated or Qualified  
To Do Business in Florida

03/20/1987

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2781710

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
D	LAGARES, BARBARA	6700-23RD STREET NORTH	ST PETERSBURG FL
VP	LAGARES, FRANK	6700-23RD ST. N.	ST. PETERSBURG FL
			100004711141--3 -12/06/01--01026--011 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LAGARES, FRANK  
6700 23RD ST NO.  
ST PETERSBURG FL 33702

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

*Barbara L. L. L.*  
REGISTERED AGENT MUST SIGN

Date

11-17-01

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: *Barbara L. L. L.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-17-01 7295211528

**BSS**

**BUSINESS SERVICE SYSTEMS, PA**

6600 - 4th Street N., Suite 101  
St. Petersburg, Florida 33702  
(727) 520-8652 FAX 521-0552

November 15, 2001

Florida Department of State  
Division of Corporations  
Annual Report/Reinstatement Section  
P. O. Box 6327  
Tallahassee, FL 32314-6327

Subj: 2001 Annual Report/Uniform Business Report

Please find enclosed our completed Application for Reinstatement for BBB Roofing & Sheet Metal Works, Inc. - We never received any previous notices and are not sure of the reason for non-receipt. We have verified the mailing address you have on record as being the correct address.

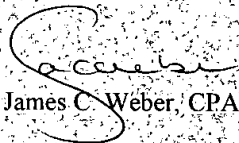
We assure you that if we had received the original annual report and/or the second notice, we would surely have filed it. This corporation has always tried in good faith to comply with all state and federal requirements.

We are requesting abatement of any late penalties related to this matter due to the fact that we never received the previous annual report notices from your office.

Also enclosed is a check for the original renewal fees owed of \$150.00.

If you should have any questions, please do not hesitate to contact my office.

Sincerely yours,



James C. Weber, CPA

Enclosures (2)