

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

96 DEC 31 AM 10:42

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT #

J69995

1 Corporation Name

S H I C Holding Company Inc.

Principal Place of Business

Mailing Address

Broward County

2701 N. W. 62nd Street
Ft. Lauderdale, Fla.
33309

REINSTATEMENT

89-96

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

DO NOT WRITE IN THIS SPACE

2 New Principal Office Address, If Applicable

3 New Mailing Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0003764

Applied For

Not Applicable

City & State

City & State

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required
for a Certificate of Status

Zip

Country

Zip

Country

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
1	2	3	4
Pres. Treas.	William J. Little	2701 N. W. 62nd Street	Ft. Laud. Fla. 33309
Vice- Pres.	Gregory D'Angio	2701 N. W. 62nd Street	Ft. Laud. Fla. 33309
Sec.	John J. Haun	2701 N. W. 62nd Street	Ft. Laud. Fla. 33309

400002044744--3
-01/03/97--01110--002
***1358.75 ***1358.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

William J. Little
2701 N. W. 62nd Street
Ft. Lauderdale, Fla. 33309

Name

William J. Little

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

2701 N. W. 62nd Street

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State

FL

Zip Code

33309

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

William J. Little

Date

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information
on intangible tax.)

12 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: x

William J. Little

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-973-1900

Date

Daytime Phone #

CR2040 (12/95)