

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

93 NOV 19 PM 4:18

DOCUMENT # J90735

1. Corporation Name

C SIDE SHEET METAL INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

% TIMOTHY LEE COX
1876 DE ANDRE'S WAY SB
DELRAY BCH FL 33445
US

% TIMOTHY LEE COX
1876 DR ANDRE'S WAY SB
DELRAY BCH FL 33445
US

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



REINSTATEMENT 90

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business In Florida

09/03/1987

5. FEI Number

59-2843531

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)

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 (Do NOT Use Post Office Box Numbers) Street Address of Each Officer and/or Director | 4 City / State / Zip |
|---------------|---|---|-------------------------|
| PTD | COX, TIMOTHY LEE | 360 NW 5TH AVENUE | BOCA RATON FL |
| VSD | COX, SUSANNA HERMAN | 360 NW 5TH AVENUE | BOCA RATON FL |
| PTSD | PROFFIT, JOHN M | 18463 SPANISH ISLES COURT | BOCA RATON FL |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

700002699867--5
-12/02/98--01032--007
****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PROFFITT, JOHN M
18463 SPANISH ISLES COURT
BOCA RATON FL 33496

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

John M. Proffitt
REGISTERED AGENT MUST SIGN

Date

11/14/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax)

12. 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:

John M. Proffitt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/14/98

Daytime Phone #

561-272-4945

CR2ED40 (9/98)