

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

APPLICATION FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K36269

1. Corporation Name

ABCA SEAMLESS RAINGUTTERS AND HILLS ALUMINUM PRODUCTS INC

Principal Place of Business

Mailing Address

C/O CHARLES ZOMBAR
2405 N. 21ST AVE.
PEMBROKE PINES FL 33020

C/O CHARLES ZOMBAR
2405 N. 21ST AVE.
PEMBROKE PINES FL 33020

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

10/04/1988

5. FEI Number

65-0089819

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 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	ZOMBAR, CHARLES	2405 N 21 AVE	HOLLYWOOD FL

600002373756--6
-12/16/97--01092--009
****173.75 ****173.75

12-10-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ZOMBAR, CHARLES
7021 S.W. 10TH ST
PEMBROKE PINES FL 33023

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

Charles S. Zombar

REGISTERED AGENT MUST SIGN

Date

11/9/97

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:

Charles S. Zombar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/9/97

Daytime Phone #

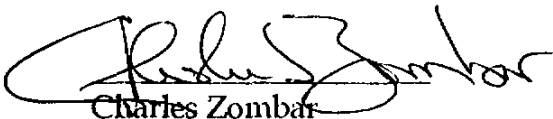
CR2E040 (3/97)

HILLS ALUMINUM PRODUCTS, INC.
2405 NORTH 21ST AVENUE
HOLLYWOOD, FL 33020

To: Florida Department Of State-division Of Corporations

In May of this year we sent in our renewal fee for the corporation. We never received any type of notice stating our current status was in jeopardy because you had not received our renewal fees. Recently we received a notice of dissolution with \$650.00 reinstatement fee. I immediately called your office and was told to send a new check for \$165.00 plus \$8.75 for a certificate of status, with an explanation, I sincerely hope this will resolve the situation.

Thank you in advance,



Charles Zombar
65-00898 19