

APPROVED
AND
FILED

①

H98000006973

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1998 APR 13 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # K85321

1 Corporation Name

DANNY'S FISH EXPRESS, INC.

Principal Place of Business

Mailing Address

500 NE 185 St.
Miami, FL 33166

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

05/01/1989

Suite, Apt. #, etc.

Suite, Apt. #, etc.

6. FEI Number

Applied For

City & State

City & State

65-0121658

Not Applicable

Zip

Country

Zip

Country

8. 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
D	Danny A. Lundy	6595 NW 36th St.	Miami, FL

REINSTATEMENT '95-'98
SCC 4-13-98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Richard J. Potash
13899 Biscayne Blvd.
N. Miami Beach, FL 33181

Name

Danny A. Lundy

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

500 NE 185 St.

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33166

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date

4-8-98

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 taxes 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)(j), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Prepared by: Danny A. Lundy 500 NE 185th St. Miami, FL 33166 (653-4771)

CR05940 (1/98)

#K85321

(2)

4/13/98

FLORIDA DIVISION OF CORPORATIONS
PUBLIC ACCESS SYSTEM
ELECTRONIC FILING COVER SHEET

12:30 PM

((H98000006973 5))

TO: DIVISION OF CORPORATIONS

FAX #: (850)922-4000

FROM: FAS-T CORP. AGENTS, INC.
CONTACT: LIDIA FERNANDEZ
PHONE: (305)599-0839

ACCT#: 071001002335

FAX #: (305)716-0346

NAME: DANNY'S FISH EXPRESS, INC.
AUDIT NUMBER.....H98000006973
DOC TYPE.....CORPORATION REINSTATEMENT
CERT. OF STATUS..0 PAGES..... 1
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EST.CHARGE.. \$1,245.00

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AUDIT NUMBER ON THE TOP AND BOTTOM OF ALL PAGES OF THE DOCUMENT

** ENTER 'M' FOR MENU. **

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98 APR 13 PM 2:05

DIVISION OF CORPORATIONS