

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

98 FEB 20 PM 4:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L70487

1. Corporation Name

DRBJ CORP.

Principal Place of Business

5301 NW 9TH AVENUE
5301 NW 9TH AVENUE
FT. LAUDERDALE FL 33309

Mailing Address

5301 NW 9TH AVENUE 608 Cypress Key Dr
5301 NW 9TH AVENUE 608 Cypress Key Dr
FT. LAUDERDALE FL 33309
Atlantis, FL 33462-1241

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

05/02/1990

5. FEI Number

65-0191211

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
D	THOMPSON, DAVID R.	5301 NW 9TH AVENUE 608 Cypress Key Dr	FT. LAUDERDALE FL Atlantis, FL 33462-1241
D	THOMPSON, RICHARD	5301 NW 9TH AVENUE 608 Cypress Key Dr	FT. LAUDERDALE FL Atlantis, FL 33462-1241
D	THOMPSON, SANDRA L.	5301 NW 9TH AVENUE 608 Cypress Key Dr	FT. LAUDERDALE FL Atlantis, FL 33462-1241

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

THOMPSON, DAVID R.

5301 NW 9TH AVENUE 608 Cypress Key Dr
FT. LAUDERDALE FL 33309 Atlantis, FL 33462-1241

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

REGISTERED AGENT MUST SIGN

Date

2/18/98

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/96)