

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 JAN -2 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N15139

1. Corporation Name

PETS ARE LOVE INC. (P.A.L.)

Principal Place of Business

C/O ETTA SINGLETON
1801 N.W. 103RD STREET
MIAMI FL 33147

Mailing Address

C/O ETTA SINGLETON
1801 N.W. 103RD STREET
MIAMI FL 33147

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

05/28/1986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number 59-2642485

Applied For

City & State

City & State

Not Applicable

Zip

Country

Zip

Country

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
DP	SINGLETON, ETTA	1801 NW 103RD ST	MIAMI FL
DS	SINGLETON-TOWLE, ETTA	1860 KEYSTONE BLVD	N. MIAMI FL 33181
DT	TOWLE, TED	1860 KEYSTONE BLVD	N. MIAMI FL 33181
VP	TOWLE, TED	1860 KEYSTONE BLVD	N. MIAMI FL 33181
200002393132---4 -01/07/98--01094--025 ****245.00 ****245.00			

8. Name and Address of Current Registered Agent

SINGLETON, ETTA
1801 N.W. 103RD STREET
MIAMI FL 33147

9. Name and Address of New Registered Agent

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

Etta Singleton
REGISTERED AGENT MUST SIGN

Date 12-29-1997

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:

Etta Singleton-Towle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-29-1997 (305) 891-2291