

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 JUN -4 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000001509

1. Corporation Name

THE OUTBACK PLAT ASSOCIATION, INC.

000020518780
06/04/03--01047--008 ***420.00

2. Principal Office Address c/o Lida
8751 W. Broward Blvd.

3. Mailing Office Address
C/O Carl H. Lida

Suite, Apt. #, etc.
305

Suite, Apt. #, etc. Suite # 305
8751 West Broward Blvd.

City & State
Plantation, FL

City & State
Plantation, FL

Zip
33324

Country
USA

Zip
33324

Country
USA

**4. Date Incorporated or Qualified
To Do Business in Florida** 3/31/93

5. FEI Number
650442954

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Carl H. Lida

Street Address (P.O. Box Number is Not Acceptable)
8751 West Broward Blvd.

Suite, Apt. #, Etc.
305

City
Plantation,

State
FL

Zip Code
33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Carl H. Lida

REGISTERED AGENT MUST SIGN

Date 5/30/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Dir.	Carl H. Lida	12260 N.W. 7th Street	Plantation, FL 33325
Pres.	Curt Kreisler	12391 N.W. 7th Street	Plantation, FL 33325
V.P.	Andrew Tabatchnick	12101 N.W. 7th Street	Plantation, FL 33325
Treas.	Mitchell Lieberman	12261 N.W. 7th Street	Plantation, FL 33325

10. 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:

Carl H. Lida

5/30/03

(954) 472-5001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

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