

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 Oct 22 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000016401

1. Corporation Name

S & B RENOVATIONS, INC.

Principal Place of Business

3600 S STATE ROAD 7, STE. 334
MIRAMAR FL 33023

Mailing Address

3600 S STATE ROAD 7, STE. 334
MIRAMAR FL 33023

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/10/2000

5. FEI Number

65-0988899

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	4 City / State / Zip
P/D	SAMUEL STENNETT	3600 S. STATE RD 7 # 334	MIRAMAR FL 33023

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

STENNETT, SAMUEL
3600 S STATE ROAD 7, STE. 334
MIRAMAR 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

REGISTERED AGENT MUST SIGN

Date

10/18/01

11. 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 #

10/18/01 (954) 520-389

Division Of Corporations
PO Box 6327
Tallahassee, FL 32314

October 18th, 2001

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Re: S & B RENOVATIONS, INC.
Doc # P00000016401

Gentlemen,

I am in receipt of your letter stating your intent to dissolve the above Corporation.
If I may explain, I did not receive the previous rejection letter as indicated..

I am asking if you could kindly waive this penalty and allow me to renew again,
as per our conversation.
The check for \$150.00 was already forwarded.

Yours truly,

Samuel Stennett
President.

A handwritten signature in dark ink, appearing to be 'S. Stennett', with a large, stylized flourish extending from the end of the signature.