

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000035754

1. Corporation Name

ENDURANCE AUTO BROKERS, INC.

Principal Place of Business

312 STATE ROAD 84
FT LAUDERDALE FL 33315

Mailing Address

312 STATE ROAD 84
FT LAUDERDALE FL 33315

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

04/06/2000

5. FEI Number

65-0998508

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	BURRUANO, JEFFREY S	5630 NW 80TH TERRACE	PARKLAND FL 33067

600004778116--0
-01/16/02--01025--022
*****758.00 *****758.00

8. Name and Address of Current Registered Agent

FLORIDA INCORPORATORS, INC.
1221 BRICKELL AVENUE SUITE 900
MIAMI FL 33131

9. Name and Address of New Registered Agent

Name: Mickal Gault
Street Address (P.O. Box Number is Not Acceptable):
5630 NW 80th Terrace
Suite, Apt. #, Etc.:
City: PARKLAND State: FL Zip Code: 33067

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

Date 12-21-01

REGISTERED AGENT MUST SIGN

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: X

JEFFREY S. BURRUANO

Date

Daytime Phone #

12-21-01 954-768-9695

CR2E040 (8/01)