

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

03 NOV -6 PM 1:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000038106

1. Corporation Name

A & R PARQUET CORP.

Principal Place of Business

4174 INVERRARY DRIVE  
SUITE 102  
LAUDERHILL FL 33319

Mailing Address

4174 INVERRARY DRIVE  
SUITE 102  
LAUDERHILL FL 33319

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

2. New Principal Office Address, If Applicable

10947 W BROWARD  
Suite, Apt. #, etc.  
BLVD

City & State  
PLANTATION FL

Zip Country  
33324 USA

3. New Mailing Office Address, If Applicable

16894 Crestview Ln  
Suite, Apt. #, etc.

City & State  
Weston Florida

Zip Country  
33326 USA

4. Date Incorporated or Qualified  
To Do Business in Florida

04/14/2000

5. FEI Number

65-0999612

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
PD	FREITES, ALVARO T	16894 Crestview Ln	Weston FL 33326

8. Name and Address of Current Registered Agent

FREITES, ALVARO  
4174 INVERRARY DRIVE  
SUITE 102  
LAUDERHILL FL 33319

9. Name and Address of New Registered Agent

Name  
Freites Alvaro  
Street Address (P.O. Box Number is Not Acceptable)  
16894 Crestview Ln  
Suite, Apt. #, Etc.  
City  
Weston  
State  
FL  
Zip Code  
33326

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

*Alvaro Freitas*  
REGISTERED AGENT MUST SIGN

Date 11/01/03

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:

*Alvaro Freitas*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/01/03 (954) 236-3222  
Date Daytime Phone #

CR2E040 (8/01)

2012

November 1, 2003

Please know that I never received the form needed for renewing and maintaining the corporation active. I just found out that the corporation is inactive when I applied for a bank loan. Please reinstate my corporation. I add here \$300.00 for the annual fees. Since it was not our fault please waive the penalty fee.

Sincerely,

A handwritten signature in cursive script, appearing to read 'Alvaro Freitas', written over a horizontal line.

Alvaro Freitas