

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 JAN 13 AM 9:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000055107

1. Corporation Name

SHF INVESTMENTS, INC.

Principal Place of Business

1925 N. FEDERAL HIGHWAY
BOCA RATON FL 33432

Mailing Address

20814 VIA VALENCIA DRIVE
BOCA RATON FL 33433

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

06/08/2000

5. FEI Number

65-1022784

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	FUENTES, STACEY H	20814 VIA VALENCIA DRIVE	BOCA RATON FL 33433
P/V/S T/D	FUENTES, STACEY H	20814 VIA VALENCIA DRIVE	BOCA RATON FL 33433

8. Name and Address of Current Registered Agent

DICKENSON, DAVID B
980 N. FEDERAL HIGHWAY
SUITE 410
BOCA RATON FL 33432

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 10/28/02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/02)

SHF INVESTMENTS, INC.
dba Fran's Chicken Haven
Stacey Hayhurst-Fuentes

1925 N. FEDERAL HIGHWAY
BOCA RATON, FL 33432

PHONE 561-395-0781
FAX 561-395-3689
EMAIL SHFUENTES-AOL.COM

January 07, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Reinstatement of Corporation
SHF INVESTMENTS, INC.
Document # P00000055107

To whom it may concern,

I, Stacey Hayhurst-Fuentes, Owner, Director, and corporate officer, did not receive any 2002 annual report/uniform business report, and therefore, was unable to comply with the registration.

I have enclosed the Reinstatement Application along with a check in the amount of \$300.00 per the instructions I received from your headquarters. I request the late fees be waived. I thank you for your cooperation in this matter.

Sincerely,



Stacey Hayhurst-Fuentes
President, Owner