

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 21 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00000092829**

1. Corporation Name

PEREZ BROTHERS, INC.

Principal Place of Business

14301 SW 216 ST
GOULDS FL 33170

Mailing Address

14301 SW 216 ST
GOULDS FL 33170

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

10/02/2000

5. FEI Number

59-1230907

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	PEREZ, JESUS	22225 SW 147TH AVE	MIAMI FL 33170
VD	PEREZ, ANTONIO	2005 SW 92ND COURT	MIAMI FL 33165
STD	PEREZ, JOSE M	3401 SW 17TH ST	MIAMI FL 33145

800023966638
10/21/03--01048--022 **750.00

8. Name and Address of Current Registered Agent

PEREZ, JESUS
22225 SW 147TH AVE
MIAMI FL 33170

9. Name and Address of New Registered Agent

Name

Jesus Perez

Street Address (P.O. Box Number is Not Acceptable)

22225 SW 147 AVE

Suite, Apt. #, Etc.

City

Goolds,

State

FL

Zip Code

33170

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

Jesus Perez
REGISTERED AGENT MUST SIGN

Date

10-16-03

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:

Jesus Perez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jesus Perez

Date

Daytime Phone #

10-16-03 305-258-2284

CR2E040 (7/03)