

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Division of Corporations

DOCUMENT # P00000110005

1. Corporation Name

SOUTH DADE HOME REPAIR, INC.

Principal Place of Business

Mailing Address

21725 SW 187TH AVENUE
MIAMI FL 33170

21725 SW 187TH AVENUE
MIAMI 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

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

11/28/2000

5. FEI Number

65-1062784

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	HONERKAMP, NEAL	21725 SW 187TH AVENUE	MIAMI FL 33170
			100004658161--6 -10/30/01--01003--010 ****150.00 ****150.00
			LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CHENEY, GEOFFREY C
C/O AKERMAN SENTERFITT
ONE S.E. 3RD AVENUE, 28TH FLOOR
MIAMI FL 33131

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

SIGNATURE REQUIRED

Date

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/12/01

Date

305-898-8658

Daytime Phone #

FILED

01 OCT 17 PM 3:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E040 (8/01)

2012

South Dade Home Repair

Residential & Commercial

October 12, 2001

To Whom It May Concern:

Yesterday, I received a "Statement of Dissolution" for my corporation, South Dade Home Repair, Incorporated (EIN 65-1062784).

Since this is my first year in business, I did not know that I had to pay a fee to the Department of State by May 1 (this I realized after talking to a business associate of mine). I should also mention that I did not receive a statement other than this one, or I would have figured out that I needed to pay this filing fee.

I have enclosed a check for \$150.00 for 2001. I know that ignorance is not a valid answer but I hope that you can show some support and sympathy in my particular case. I guarantee you that this will not happen again.

Thank you for taking the time to read my letter, and I hope that I can thank you now for your consideration and support to a first time business owner. If you should have any questions, please call me at 305-242-6556

Sincerely,



Neal Honerkamp