

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2001
**APPLICATION
FOR
REINSTATEMENT**



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

10/2
FILED

01 DEC '21 PM 12:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000001043

1. Corporation Name

ANGEL & ASSOCIATES ENTERPRISE OF TAMPA, INC.

Principal Place of Business

Mailing Address

~~12718 DUNHILL DRIVE~~
~~TAMPA FL 33624~~

~~12718 DUNHILL DRIVE~~
~~TAMPA FL 33624~~

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

2. New Principal Office Address, If Applicable

P.O. BOX 271688

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

12/26/2000

5. FEI Number

59-3680339

Applied For

Not Applicable

City & State

Tampa FL

City & State

Zip

33688

Country

Zip

Country

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
P	TEWKSBURY, SAWSAN	12718 DUNHILL DRIVE	TAMPA FL 33624

300004883333--6
-02/08/02-01055-013
****150.00 ****150.00

8. Name and Address of Current Registered Agent

TEWKSBURY, SAWSAN
12718 DUNHILL DRIVE
TAMPA FL 33624

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.

Signature of
Registered Agent

X Sawsan Tewksbury
REGISTERED AGENT MUST SIGN

Date

12/14/01

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

12/14/01

Date

(813) 962-1580

Daytime Phone #

CR2E040 (8/01)

2062

November 08, 2001

Florida Department of Revenue
Division of corporations
2001 Uniform Business Report

From: Angel & Associates Enterprise of Tampa Inc.
P. O. Box 271688
Tampa Florida 33688

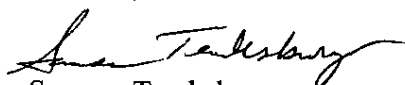
Dear Sir / Mrs.,

The principal place of business and the mailing address shown on the UBR form is incorrect. I assume this could be the reason why I did not receive the UBR form for the first and the second time. Yet mysteriously I have received the notice of dissolution, thus I was surprised of the contents of it. Being ignorant with such notices, I've never expected to receive one. As I become knowledgeable with this form right now, I will be expecting it every year.

Due to lack of information and ignorant of various laws, I'd like you to accept the enclosed check for \$150.00 representing the original annual fee for the 2001 Uniform Business Report.

Thank you for your understanding and cooperation in solving this matter. If additional information is needed, please do not hesitate to write or call @ (813) 962-1580.

Sincerely,


Sawsan Tewksbury
President