

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV 27 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000034486

1. Corporation Name

KARP CONSTRUCTION INC.

Principal Place of Business

7921 VENTURE CENTER WAY #1201
BOYNTON BEACH FL 33437

Mailing Address

7921 VENTURE CENTER WAY #1201
BOYNTON BEACH FL 33437



02-13-02 90218 018 \$150.00

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

04/02/2001

5. FEI Number

65-0880023

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	GRANT, PATRICK	7921 VENTURE CENTER WAY #1201	BOYNTON BEACH FL 33437

8. Name and Address of Current Registered Agent

LIVERPOOL, RUTH
7921 VENTURE CENTER WAY #1201
BOYNTON BEACH FL 33437

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

11/25/02

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

11/25/02

Daytime Phone #

CR2E040 (8/02)

Lass Accounting & Business Services, Inc.

8428 W. Oakland Prk. Blvd. Sunrise, FL 33351

(954) 746-5011 Fax: (945) 746-7996

11/21/02

Divisions of Corporations

P.O. Box 6327

Tallahassee, FL 32314

RE: Karp Construction, Inc.

To Whom It May Concern:

In reference to the above corporation, my client, received from the department of state an application for reinstatement stating that the corporation was dissolved due to non filing of the 2002 UBR. It is to our understanding that our client didn't receive the letters the divisions allegedly sent to my client stating that the 2002 UBR was not completed correctly and that the EIN # was not present. Therefore there was no response.

Please be aware that the 2002 UBR had been filled out complete and submitted with the \$150 filling before the deadline, May 1, 2002.

Once again, I have enclosed copies of the 2002 UBR, the copy of the payment of \$150 filing fee which was sent to the department of state before the corpoartion was dissolved. I have also enclosed a completed reinstatement application with the requested EIN # that was missing from the 2002 UBR.

We ask that you please take this into consideration and waive my client's penalty fees and reinstate my client's corporation. Thank you for your consideration.

Respectfully,



Carleecia Gordon

Accounting Assistant