

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 FEB 12 PM 2:16

DOCUMENT # P01000093414

1. Corporation Name

BGH Enterprises Inc.

SECRETARY OF STATE  
800012386303  
02/12/03--01047--005 \*\*308.75

2. Principal Office Address

2201 W Sample Rd

Suite, Apt. #, etc.

Suite 16

City & State

Pompano Beach, FL

Zip

33073

Country

Broward

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/25/01

5. FEI Number

59-3745915

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Barry Hadley

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

2201 W Sample Rd

Suite, Apt. #, Etc.

Suite 16

City

Pompano Beach

State

FL

Zip Code

33073

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Barry Hadley

REGISTERED AGENT MUST SIGN

Date

2/7/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	Barry Hadley	2201 W Sample Rd #16	Pompano Beach, FL 33073

10. 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:

Barry Hadley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-03

Date

954-974-3379

Daytime Phone #

CR2E081 (10/02)

TO: FLORIDA DEPT OF STATE

FR: BGH ENTERPRISES, INC.

RE: REINSTATEMENT OF CORPORATION

DT: February 7, 2003

PLEASE REINSTATE BGH ENTERPRISES BECAUSE OUR INITIAL MAILING ADDRESS ON THE ANNUAL REPORTS WERE INCORRECT. ENCLOSED PLEASE FIND A CHECK FOR \$308.75 TO COVER ANNUAL DUES FOR 2002 AND 2003. THANK YOU FOR YOUR IMMEDIATE ATTENTION TO THIS MATTER AND IF THERE ARE ANY QUESTIONS PLEASE CONTACT BARRY HADLEY AT 954 682 9990.

*Barry Hadley*