

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

05 NOV 29 PM 4:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000119883

**1. Corporation Name**

L & R ENTERPRISES OF BREVARD, INC.  
5083 RIVEREDGE DRIVE  
TITUSVILLE, FL 32780

**2. Principal Office Address**

5083 RIVEREDGE DRIVE

Suite, Apt. #, etc.

**City & State**

TITUSVILLE, FL

Zip  
32780

Country

**3. Mailing Office Address**

5083 RIVEREDGE DRIVE

Suite, Apt. #, etc.

**City & State**

TITUSVILLE, FL

Zip  
32780

Country

**REINSTATEMENT 02-05**  
CR2E081 (8/05)

**4. Date Incorporated or Qualified  
To Do Business in Florida**

**5. FEI Number**

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

RICHARD PERRY

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

5083 RIVEREDGE DRIVE

Suite, Apt. #, Etc.

City

TITUSVILLE, FL

State

FL

Zip Code

32780

300061747723  
11/29/05--01029--017 \*\*1200.00

**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

*Richard Perry*

REGISTERED AGENT MUST SIGN

Date 11-22-05

**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
PST	RICHARD PERRY	5083 RIVEREDGE DRIVE	TITUSVILLE, FL 32780
V	NORMAN SCHOTT	3110 DIAMOND ROAD	TITUSVILLE, FL 32796

**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Richard Perry*

11-22-05 321-961-2200

Date

Daytime Phone #