

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 AUG 25 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01610

1. Corporation Name **Charles J. Becker & Bro, Inc.**
12300 McNulty Rd
Philadelphia, Pa 19154

2. Principal Office Address - No P.O. Box #

12300 McNulty Rd

Suite, Apt. #, etc.

3. Mailing Office Address

12300 McNulty Rd

Suite, Apt. #, etc.

City & State

Philadelphia, Pa.

City & State

Philadelphia, Pa

Zip

19154

Country

USA

Zip

19154

Country

USA

7. Name and Address of Current Registered Agent

Name

J. Nicholas Becker

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

8165 N.W. 47th Drive

Suite, Apt. #, Etc.

City

CORAL SPRINGS

State

FL

Zip Code

33067

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

23-1647078

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

[Signature]

REGISTERED AGENT MUST SIGN

Date **8-19-08**

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	George J. Becker	916 Nicholson Rd.	Wynnewood, PA 19096
SECT	Albert J. Becker JR.	P.O. Box 372	Gwynedd Valley, PA 19437
V.P.	Edward J. Becker	32 Emmans Rd	Ledge wood, N.J. 07852
V.P.	Charles J. Becker III	1814 Mower St.	Philadelphia, PA 19152

800134917928

08/25/08--01061--008 **750.00

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 contained in Chapter 119, 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:

George J. Becker **George J. Becker**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-13-08

Date

215-464-6565

Daytime Phone #

2/26/00