

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JAN 15 PM 2:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PD2 000010737

1. Corporation Name

GOLDEN EAGLE PROTECTIVE SERVICE, INC.

2. Principal Office Address

6700 W 24 CT

Suite, Apt. #, etc.

14

City & State

HALEAH, FL

Zip

33016

Country

DADE

3. Mailing Office Address

15476 NW 77 CT

Suite, Apt. #, etc.

510

City & State

MIAMI LAKES, FL

Zip

33016

Country

DADE

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

1/30/2002

5. FEI Number

01-0672995

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

TAIMY BARRERAS

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

6700 W 24 CT

Suite, Apt. #, Etc.

14

City

HALEAH

900026987529

01/15/04-01010-007 **10.00

State

FL

Zip Code

33016

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

Taimy Barreras

REGISTERED AGENT MUST SIGN

Date

1/6/04

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
P	MARIO A PUENTE	6700 W 24 CT #14	HALEAH, FL 33016
VP	NIDIA BARRERAS	6700 W 24 CT #14	HALEAH, FL 33016
ST	TAIMY BARRERAS	6700 W 24 CT #14	HALEAH, FL 33016

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:

Taimy Barreras

TAIMY BARRERAS

Date

1/6/04

Daytime Phone #

(305) 825-7016

CR2E081 (10/02)

TR

GOLDEN EAGLE PROTECTIVE SERVICES, INC.

6700 W 24TH CT # 14
HIALEAH, FL 33016

PHONE: 305-825-7016

FAX: 305-556-7121

December 19, 2003

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302

Dear Sir or Madam,

The purpose of this letter is to inform you that I did not receive the notices of the Uniform Business Report. I gave my new address to my previous accountant as soon as we moved to the new address and he said to us that he was going to take care of it which apparently he never did.

My address is:

6700 W 24TH CT # 14
HIALEAH, FL 33016

The Registered agent is the same: Taimy Barrereas and her new address is:

6700 W 24TH CT # 14
HIALEAH, FL 33016

The president of the company is the same Mario Puente and his new address is:

6700 W 24TH CT # 14
HIALEAH, FL 33016

Please make a note of it.

I am hereby requesting you to please abate the penalty in the amount of \$600.00 for sending the payment late. At the same time I am enclosing a check in the amount of \$150.00.

Thanking you in advance for your help.

Sincerely,



Nidia Barreras
Vice President