

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 31 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000013307

1. Corporation Name

BROTHERS MOVING AND STORAGE OF FLORIDA, INC.

Principal Place of Business

Mailing Address

1704-B PARK CENTRAL BLVD
POMPANO BEACH FL 33064

1704-B PARK CENTRAL BLVD
POMPANO BEACH FL 33064

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1571 W. COPANS Rd. SUITE 102

SUITE # 102

City & State

City & State

POMPANO BCH FL

POMPANO BCH FL

Zip

Country

Zip

Country

33064

BROWARD

33064

BROWARD

4. Date Incorporated or Qualified
To Do Business in Florida

01/31/2002

5. FEI Number

90-0010607

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	DASILVA, JOHN S	2080-2082 NORTH UNIVERSITY DRIVE	SUNRISE FL 33322
VD	DASILVA, LAURA M	2080-2082 NORTH UNIVERSITY DRIVE	SUNRISE FL 33322
D	ERWIN, THOMAS V JR.	2080-2082 NORTH UNIVERSITY DRIVE	SUNRISE FL 33322
D	DASILVA, AMILCAR	1101 RIVER REACH DR #209	FT. LAUDERDALE, FL. 33015
			400024337674 10/31/03--01080--015 **150.00

8. Name and Address of Current Registered Agent

DASILVA, JOHN S
2080-2082 NORTH UNIVERSITY DRIVE
SUNRISE FL 33322

9. Name and Address of New Registered Agent

Name

DASILVA, JOHN S

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

1571 W. COPANS Rd. SUITE # 102

Suite, Apt. #, Etc.

SUITE # 102

City

POMPANO BCH.

State

FL

Zip Code

33064

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

10/27/03

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

10/27/03

Daytime Phone #

954-969-8688

CR20040 (7/03)



1571 W. Copans Rd. Suite #102 • Pompano Bch., FL 33064 • 954-969-8688 • 954-969-8702Fax



10/27/03

Department of State
Division of Corporations
409 E. Gains St.
Tallahassee, FL 32399

To Whom It May Concern:

This letter is to indicate that we did not receive the original documentation for reinstatement of Brothers Moving and Storage of FL INC. corporation information. Please accept this check and filled out document with the new information and changes.

Please call or e-mail me at john@brothersmoving.com the end result of the information received and let me know if there is any further information you need.

Sincerely,

John DaSilva
President
Brothers Moving & Storage of FL INC.

The Official Movers of:



www.brothersmoving.com