PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAY 14 PM 2:06

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000054566

1. Corporation Name

S+B Rentals Inc

REINSTATEMENT 03-04

2. Principal Office Address	3. Mailing Office Address
Suite, Apt. #, etc.: 701 NW 7th Ave	Suite, Apt. #, etc.: PO Box 612601
City & State: Hallandale FL	City & State: N Miami FL
Zip: 33009 Country: USA	Zip: 33161 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: 5-29-02

5. FEI Number: 01-0691876 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: John Shoup

Street Address (P.O. Box Number is Not Acceptable): 1401 SE 15th Street

Suite, Apt. #, Etc.: Apt 111

City: Ft Lauderdale State: FL Zip Code: 33316

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: _____ Date: 5/13/04

REGISTERED AGENT MUST SIGN

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	John Shoup	PO Box 612601	N Miami FL 33161

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: _____ 5/13/04 786-326-2640

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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I, John Shoup of S+B Realtors Inc
Do hearby request that the
re instatement fee be waived b/c
I did not recieve UBR.

Pres. of S+B Realtors Inc

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Florida Department of State

Division of Corporations

Public Access System

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CORPORATION REINSTATEMENT

S &B RENTALS INC.

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