

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 17 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P02 0000 62965

1. Corporation Name

A & K Brothers Inc.

800023912842
10/17/03--01081--015 **158.75

2. Principal Office Address

3821 SW 63 Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

2420 NW 87th Lane

Suite, Apt. #, etc.

REINSTATEMENT 03

City & State

Davie, FL

City & State

Sunrise, FL

Zip

33314 U.S.A.

Zip

33322 USA

4. Date Incorporated or Qualified
To Do Business in Florida

6/7/02

5. FEL Number

03-D437933

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

Ameerah Adejola

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

2061 Coral Ridge Drive

Suite, Apt. #, Etc.

City

Coral Springs

State

FL

Zip Code

33071

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

Ameerah Adejola

Date

10/13/03

REGISTERED AGENT MUST SIGN

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	Rondell Acharbar	3821 SW 63rd Ave	Davie, FL 33314
Vice	Same	Same	
Treas	same		
Sec	same		

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:

Rondell Acharbar

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/03

Date

(954) 347-7109

Daytime Phone #

2710/21

ALL APPLICATIONS NOT COME
BE RETURNED FOR CORREC

INSTRUCTIONS OF

Block

A&K Brothers
3821 SW 63rd Avenue
Davie, Fl 33314
EIN #: 03-0437933

October 15, 2003.

To Whom It May Concern:

This is to inform you that I did not receive any information to renew my corporation. I do apologize for this and hope that you will accept my application with the \$150.00 fee at this time.

Please change my mailing address to 2420 NW 87th Lane, Sunrise, Fl 33322.

Thank you,



President

Rondell Achaibar