

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED H08000006621 3

**CORPORATION
REINSTATEMENT**FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2008 JAN -9 PM 4:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000084588

1. Corporation Name

TERRYBUILDERS, INC.

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

2525 Ponce de Leon Boulevard

Suite, Apt. #, etc.

Suite 400

City & State

Coral Gables, Florida

Zip

33134

Country

USA

3. Mailing Office Address

2525 Ponce de Leon Boulevard

Suite, Apt. #, etc.

Suite 400

City & State

Coral Gables, Florida

Zip

33134

Country

USA

CR2E081 (12/07)

4. Date Incorporated or Qualified
To Do Business in Florida 08/05/2002

5. FEI Number

113659687

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

Sam Traina

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

2525 Ponce de Leon Boulevard

Suite, Apt. #, Etc.

Suite 400

City

Coral Gables

State

FL

Zip Code

33134

☒ 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

Date 01/09/08

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
D	George Yoss	2525 Ponce de Leon Blvd., Ste. 400	Coral Gables, FL 33134
D	Lisa Garter Yoss	2525 Ponce de Leon Blvd., Ste. 400	Coral Gables, FL 33134

REINSTATEMENT

04-08

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 Yoss

01/09/08

305-460-1000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

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Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:
Division of Corporations
Fax Number : (850) 617-6384

From:
Account Name : ADORNO & YOSS, PA
Account Number : 072100000120
Phone : (305) 860-7098
Fax Number : (305) 460-1422

*Please Waive The
\$600 Reinstatement
Fee - See Box
Checked.
Thank
you.
Gulw*

CORPORATION REINSTATEMENT

TERRYBUILDERS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,350.00

\$750.00

Electronic Filing Menu

Corporate Filing Menu

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