

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 NOV 12 PM 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000104085

1. Corporation Name

BRUTUS J. SECURITY SERVICE OF AMERICA, INC.

Principal Place of Business

Mailing Address

12615 NE MIAMI CT.
MIAMI FL 33161

12615 NE MIAMI CT.
MIAMI FL 33161

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.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/23/2002

5. FEI Number

50-007441

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
	BRUTUS, JOHNNY	12615 NE MIAMI CT.	MIAMI FL 33161

8. Name and Address of Current Registered Agent

BRUTUS, JOHNNY
12615 NE MIAMI CT.
MIAMI FL 33161

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date 10/13/03

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

Brutus J. Security Services of America, Inc.

Johnny Brutus

President

October 26, 2003

Mrs. Sharon Toner
Division of Corporations

P.O. Box 6327

Tallahassee, Florida 32314

Subject: to update Brutus J. Security Services of America, Inc status.

Ref. Number: P02000104085

We discussed this issue Friday October 23, 2003 about each time I made the update requested by the Division of Corporations in order to have the corporate name in good standing; however, the person who processed the returned corrections by Brutus J. Security Services of America, Inc always failed to make the update. Today I am indebted to Sharon Toner in advance for taking the time to finalize this issue. The enclosed document has been filed with the following correction (s):

... Line 10 and 11 are signed by the president of the company.

... The federal ID number on line 5 is provided

With the above update mentioned, I want to further acknowledge that the appropriate fee had been paid early on this year, March 26, 2003. Please wave the accrued fee for late filing because the corporate annual report/uniform business report form for Brutus J. Security Services of America, Inc had filed on time.