

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 DEC 12 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000107873

1. Corporation Name

Flamingo Glass & Mirror, Inc

REINSTATEMENT 03

2. Principal Office Address

5743 N W 7 Street

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33126

Country

Miami-dade

3. Mailing Office Address

5743 N W 7 Street

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33126

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

02 0647391

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

300025455123
12/12/03--01040--005 **150.00

7. Name and Address of Current Registered Agent

Name

Stella Haas

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

5743 N W 7 Street

Suite, Apt. #, Etc.

City

Miami, FL

State
FL

Zip Code
33126

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

Stella Haas

REGISTERED AGENT MUST SIGN

Date

12/10/03

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
P/D	Stella Haas	5743 N W 7 Street	Miami, FL 33126

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:

Stella Haas

Stella Haas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/10/03

Daytime Phone #

305-265-1113

CR2E081 (10/02)

FLAMINGO GLASS & MIRROR, INC
5743 N W 7 STREET
MIAMI, FL 33126

DECEMBER 9, 2003

Department of State
Division of Corporations
Tallahassee, Florida

RE: FLAMINGO GLASS & MIRROR, INC
P02000107873

Gentlemen:

Enclosed is our reinstatement form for the corporation. We had never received any of your prior notices and wish to reinstate the corporation.

FLAMINGO GLASS & MIRROR, INC.

STELLA HAAS, PRESIDENT
