

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT 16 AM 8:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # UCSFL23R

1. Corporation Name **P0200015949**  
**RBBR, Inc.**

400023545004  
10/03/03--01063--001 \*\*300.00

**REINSTATEMENT** 02-03

2. Principal Office Address  
**11411 Starkey Road**

3. Mailing Office Address  
**11411 Starkey Road**

Suite, Apt. #, etc.

4. Date incorporated or Qualified To Do Business in Florida **10/30/2002**

City & State  
**Largo, FL**

City & State  
**Largo, FL**

5. FEI Number **223880479**  
Applied For   
Not Applicable

Zip **33773**

Country **USA**

Zip **33773**

Country **USA**

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name **Bernardo Agostino**

Street Address (P.O. Box Number is Not Acceptable) **11411 Starkey Rd**

Suite, Apt. #, Etc.

City **Largo**

State **FL**

Zip Code **33773**

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 *Bernardo Agostino*  
REGISTERED AGENT MUST SIGN

Date *sept 30, 2003*

**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
D	BERNARD AGOSTINO	11411 STARKEY RD	LARGO FL, 33773

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: *Bernardo Agostino*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*sept 30 2003*  
Date

*727-804-4099*  
Daytime Phone #

**BERNARDO AGOSTINO**

*2/10/10*

CR2ED081 (REV02)

September 29, 2003

To Whom it May Concern:

This letter is in regards to the late fee associated with the reinstatement of RBBR, Inc. I moved addresses in January of 2003 and never recieved a form to renew. Per my conversation with Tyrone Davis at the Division of Corporations this morning, it was suggested that I send a letter along with my reinstatement form explaining this fact. I would greatly appreciate that the late fees be waived and can assure you that this won't be a problem in the future. Thank you in advance for your cooperation.

Sincerely,

  
Bernardo Agostino