

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 -4 AM 11:20

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P02000116357

1. Corporation Name

PAW ENTERPRISES OF TAMPA, INC.

Principal Place of Business

Mailing Address

419 W PLATT ST
TAMPA FL

419 W PLATT ST
TAMPA FL

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

533 S. Howard Ave.
Suite, Apt. #, etc.
#3

3. New Mailing Office Address, If Applicable

205 S. Beverly Ave.
Suite, Apt. #, etc.
4

City & State
Tampa Florida

City & State
Tampa Florida

Zip
33606

Country
Hillsborough

Zip
33609

Country
Hillsborough

4. Date Incorporated or Qualified
To Do Business in Florida

10/28/2002

5. FEI Number

52-2385073

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
D	ELDRIDGE, TINA	205 S BEVERLY AVE	TAMPA FL 33609
D	ELDRIDGE, JAMES	205 S BEVERLY AVE	TAMPA FL 33609
D	ELDRIDGE, STEVE	205 S BEVERLY AVE	TAMPA FL 33609
			300024410013 11/04/03--01036--006 **150.00

8. Name and Address of Current Registered Agent

SHEA, J. MICHAEL ESQ
419 W PLATT ST
TAMPA FL

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 10/26/03

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)

October 26, 2003

**PAW Enterprises of Tampa Inc.
205 S. Beverly Ave.
Tampa, Fla 33609**

**Department of State
Division of Corporations
409 E. Gaines St.
Tallahassee, Fla 32399**

Attn: Reinstatement Section


Please find enclosed our application for corporate reinstatement along with corrected and completed necessary forms. Attached is our check in the amount of \$150.00 that was quoted for reinstatement.

As was discussed we recently received a letter from our attorney and resident agent that we had been dissolved by the state of Florida for failure to file an annual report. Unfortunately neither our resident agent nor we had received the necessary forms required to file report. Being a new corporation we were ignorant as to the necessity to file this form. And as we did not receive the forms we failed to file.

We are a small business in Tampa employing five full time employees who are dependent upon our success for their livelihood. We deeply apologize for our failure to file and certainly do not wish to do anything that might harm the our corporation with the state of Florida or our employees.

We have now solicited both our attorney as well as our accountant inquiring that we have all the necessary documentation and information necessary to be current as required by Florida.

Thank you for information received during our recent telephone call. If there is any additional information or documentation needed from us please contact us at address above and on the corrected forms attached.

Sincerely

Steve Eldridge
Ch of Board