

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000056144

1. Entity Name
UNCLE SAM BUYS IT UNCLE SAM SELLS IT, INC.



FILED

05 NOV 16 - PM 4:28

ID#

SECRET
TALLAHASSEE

Principal Place of Business
9867 ORANGE PARK TRAIL
BOCA RATON, FL 33428

Mailing Address
9867 ORANGE PARK TRAIL
BOCA RATON, FL 33428

9867 ORANGE PARK TRAIL

2. Principal Place of Business

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.



2005 A.R.

RE098 (6/04)

City & State
BOCA RATON FLA

City & State

4. FEI Number
EX 201262118

Applied For

Not Applicable

Zip
33428

Country
FLA

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HOCKMAN, PETER M
550 BILTMORE WAY, SUITE 780
CORAL GABLES, FL 33134

Name
WILLIAM BENNETT

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

9867 ORANGE PARK TRAIL

City
BOCA RATON

FL

Zip Code

33428

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

William Bennett

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

10/21/05

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WILLIAM BENNETT PRES

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000060631010
10/14/05--01064--008 **150.00

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
9867 ORANGE PARK TRAIL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VERNICA BENNETT SEC TREA

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BOCA RATON FL 33428

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
9867 ORANGE PARK TRAIL

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
BOCA RATON FL 33428

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William Bennett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/21/05 561470 2222

Date

Daytime Phone #