

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED

07 NOV 30 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

fb 12-3-07

CR2E081 (1/07)

REINSTATEMENT 06-07

4. Date incorporated or Qualified To Do Business In Florida 04/15/2004

5. FEI Number 52-2444157

Applied For
Not Applicable

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

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P04000065214

1. Corporation Name

B & B Enterprises of Tampa, Inc.

2. Principal Office Address - No P.O. Box #
201 W. Chapman Rd.

3. Mailing Office Address
201 W. Chapman Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Lutz, FL

City & State
Lutz, FL

Zip
33548

Country
Hillsborough

Zip
33548

Country
Hillsborough

7. Name and Address of Current Registered Agent

Name
William T. Ralston

Street Address (P.O. Box Number is Not Acceptable)
201 W. Chapman Rd.

Suite, Apt. #, Etc.

City
Lutz

State
FL

Zip Code
33548

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

Date

REGISTERED AGENT MUST SIGN

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
pres.	William Ralston	201 W. Chapman Rd.	Lutz, FL 33548

000112729450
11/30/07--01049--008 **300.00

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 contained in Chapter 119, 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

William T. Ralston

11/29/07

(813) 244-8406

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Florida Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

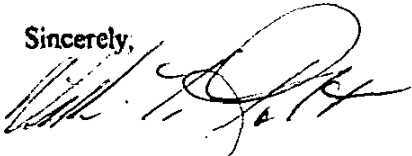
Re: B & B Enterprises of Tampa, Inc.
Doc# P04000065214

Dear Sir or Madam:

Attached please find my Application for Corporation Reinstatement. Please note that I never received any notice or annual report regarding my corporation and I was just informed by my insurance agent that my corporation is inactive. Please remove the penalties and accept my application and the \$300.00 Corporation fee for 2006 and 2007 and reinstate my corporation.

Thank you very much for your cooperation in advance.

Sincerely,



B & B Enterprises of Tampa, Inc.
14802 N. Florida Avenue, # H-125
Tampa, FL 33613
(813) 244-8406