

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P93000007533**

1. Corporation Name

ATLANTIC COMMERCIAL REFRIGERATION, INC.

Principal Place of Business

4832 N DIXIE HWY
OAKLAND PARK FL 33334
US

Mailing Address

2908 NW 48TH TERRACE
STE 228
LAUDERDALE LAKES FL 33313
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

4. Date incorporated or qualified
To Do Business in Florida

01/26/1993

5. FEI Number

65-0391148

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$6.75 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4
S	LANDRY, ROLAND	2908 NW 48TH TERRACE	LAUDERDALE LAKES FL 33313
V	LANDRY, IAN	2908 NW 48TH TERRACE	LAUDERDALE LAKES FL 33313
T	SANFORD, STERN	1707 SW WATERFALL BLVD.	PALM CITY FL 34990
P	RONDEAU, SUZANN	2908 NW 48TH TERR	LAUDERDALE LAKES FL 33313

8. Name and Address of Current Registered Agent

LANDRY, ROLAND
2908 NW 48TH TERRACE
STE 228
LAUDERDALE LAKES FL 33313

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.

Signature of
Registered Agent

Roland Landry
REGISTERED AGENT MUST SIGN

Date **10-18-99**

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:

Roland Landry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-18-99

Daytime Phone #

954-676-5776