

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 NOV -9 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000017227

1. Corporation Name

Shops of Soutel Inc.

200061628852
11/22/05--01066--003 **440.00

2. Principal Office Address

4750 Soutel Dr

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Zip

32208

Country

Duval

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

3/8/1993

5. FEI Number

59-3257711

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$9.75 Additional Fee required
for a Certificate of Status

CR2E081 (8/05)

04-05

7. Name and Address of Current Registered Agent

Name

Alfred F Denson

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

4750 Soutel Dr.

Suite, Apt. #, Etc.

City

Jacksonville, FL

State
FL

Zip Code

32208

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

Alfred F Denson

REGISTERED AGENT MUST SIGN

Date

11/9/2005

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
P/K	Alfred F Denson	4750 Soutel Dr.	Jacksonville, FL 32208
S	Leon Denson	4750 Soutel Dr.	Jacksonville, FL 32208
V	Jose Denson	4750 Soutel Dr.	Jacksonville, FL 32208

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:

Anthony Gomes

Anthony Gomes

Date

11/9/2005

Daytime Phone #

766-9038

921-2222

Shops of Soutel Inc.
4750 Soutel Dr.
Jacksonville, FL. 32208

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November 9, 2005

Dear Sirs:

As an officer and Director of Shops of Soutel-Inc, I hereby certify that we did not receive the notice for renewal for the calendar years of 2004 nor 2005.

Cathy Lee for
Shops of Soutel