

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 MAY 22 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000024692

1. Corporation Name

FIRST CHOICE CONTRACTORS INC.

Principal Place of Business

Mailing Address

37 B N.E. 1ST TERRACE
DEERFIELD BEACH, FL.
33441

P.O. BOX: 273424
BOCA RATON, FL.
33427

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

2. New Principal Office Address, If Applicable

37 B N.E. 1ST TERRACE

3. New Mailing Office Address, If Applicable

P.O. BOX: 273424

Suite, Apt. #, etc.

DEERFIELD BEACH

Suite, Apt. #, etc.

BOCA RATON, FL

City & State

Florida

City & State

BOCA RATON, FL

Zip

33441

Country

Zip

33427

Country

REINSTATEMENT 90-97

4. Date Incorporated or Qualified
To Do Business in Florida

1/26/93

5. FEI Number

65040467

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	MILINKOVIC, ANDREA	37 B N.E. 1ST TERRACE	DEERFIELD BEACH, FL. 33441
V/D	MILINKOVIC, ROBERT	370 N.W. 16TH AVE	BOCA RATON, FL. 33486
ST	DALTON, MADINE	1685 PARK TREE DR.	DEERFIELD BEACH, FL.
			200002192562--1 -05/28/97--01013--006 ***915.00 ***915.00
			JB 5-23-97

8. Name and Address of Current Registered Agent

BAEDASARIAN, RICHARD C,
1800 N.W. CORPORATE BLVD
BOCA RATON, FL. 33431

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

5/20/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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:

Andrea Milinkovic ANDREA MILINKOVIC

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/20/97

Date

954/420-0078

Daytime Phone #

CR2E040 (12/96)