

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

98 MAR 19 AM 11:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000001012

1. Corporation Name Target Sales & Service, INC

Principal Place of Business Mailing Address

90575 OLD Hwy SAME  
TAVERNIER, FLA 33070

600002467316--6  
-03/24/98--01107--017  
\*\*\*1050.00 \*\*\*1050.00

REINSTATEMENT

96-98

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

2. New Principal Office Address, If Applicable 94825 OVERSEAS Hwy  
Suite, Apt. #, etc.  
City & State TAVERNIER, FLA  
Zip 33170 Country MONROE  
3. New Mailing Office Address, If Applicable 94825 OVERSEAS Hwy  
Suite, Apt. #, etc.  
City & State TAVERNIER, FLA  
Zip 33170 Country FLA

4. Date Incorporated or Qualified To Do Business in Florida Yes AD  
5. FEI Number 65-0464884 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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PRE	ESTHER BITTELMAN	98425 OVERSEAS Hwy	Key Largo, FLA 33037
SEC	J.R. BITTELMAN	90575 OLD Hwy	TAVERNIER, FLA 33070
TRES	JR. BITTELMAN	90575 OLD Hwy	TAVERNIER, FLA 33070
DIR	JR BITTELMAN	90575 OLD Hwy	TAVERNIER, FLA 33070

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ZAC MANUEL  
100 S.E. 2ND AVE  
Suite 2350  
Miami, FLA 33131

Name J. Richard BITTELMAN  
Street Address (P.O. Box Number is Not Acceptable) 90575 OLD Hwy  
Suite, Apt. #, Etc.  
City TAVERNIER  
State FL Zip Code 33070

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 3/16/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

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 [Signature]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-16-98 865-852-0699  
Date Daytime Phone #

CR2E040 (1/98)