

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
AND
FILED

1999 AUG 04 PM 3:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-08/13/99--01112--013
***1050.00 ***1050.00

**APPLICATION
FOR
REINSTATEMENT**

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

DOCUMENT # P94000044799
1. Corporation Name
FLORIDA SECURITY PATROL, INC.

Principal Place of Business Mailing Address
6801 N.W. 77th Ave.
Suite 308
Miami, FL 33166 **Same**

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6/15/94	
City & State		City & State		5. FEI Number	
Zip		Country		65-0324626	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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	Edgar M. Chardon	6801 N.W. 77th Ave. #308	Miami, FL 33166
V.P./ Sec/D	Daniel J. Oger	6801 N.W. 77th Ave. #308	Miami, FL 33166
D	Aresh Jabbari	6801 N.W. 77th Ave. #308	Miami, FL 33166

REINSTATEMENT 99-99 ITS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Edgar M. Chardon
6801 N.W. 77th Avenue
Suite 308
Miami, Florida 33167

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State Zip Code
	FL

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 Edgar M. Chardon
REGISTERED AGENT MUST SIGN

Date **August 2, 1999**

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: Edgar M. Chardon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Edgar M. Chardon - President

August 2, 1999 (305) 888-9293
Date Daytime Phone #

CR2E040 (12/96)