PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P94000060636**

1. Corporation Name

SBS MANAGEMENT, INC.

FILED

03 OCT 21 PM 2: 15

SEGNETARY OF STATE TALLAHASSEE. FLORIDA

	MAINAGEMENT, MO.						•		
Principal Place of Business 7384 SW 9TH CT. PLANTATION FL If above addresses are incorrect in any way, line thro 2. New Principal Office Address, If Applicable Suite, Apt. #, etc.		10143 CLEAR PLANTATION	Mailing Address 10143 CLEARY BLVD — PLANTATION FL 33322 US						
		3. New Mail	3. New Mailing Office Address, If Suite, Apt. #, etc. / 0/93 Clear			4. Date Incorporated or Qualified To Do Business in Florida 08/08/1994 5. FEI Number Applied For			
		Suite, Apt. #,			y Blue				
City & Sta	ite	City & State	·	,	,		65-0599290	Not Applicable	
Zip	Country	Zip		Country		6. CERTIFICAT	E OF STATUS DESIRED 🗆	8.75 Additional Fee required for a Certificate of Status	
. Names	and Street Addresses of Each Officer an	d/or Director (Flo	rida nonprofi	t corporat	iions must list at lea	st 3 directors)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director				City / State / Zip			
DPS	SADOWSKI, PAUL		7384 SW 9TH CT			PLANTATION FL.			
STD	TD SADOWSKI, JUDITH			7384 SW 9 CT.			PLANTATION FL.		
					A IV	pa	0002399. 21/030115800		
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent Name				d Agent	
JONES, KENNETH M 1333 S. UNIVERSITY DR. SUITE 201 PLANTATION FL 33324			Street Address (F Suite, Apt. #, Etc.		State Zip Code				
ignature egistere . I certif this rei		AFOIS VERTED AG eiver or trustee er solution has been a names of individ	mpowered to eliminated, the	SIGN execute the corpor this form	his application as prate name satisfies in do not qualify for a	rovided for in chi the requirements an exemption un	Date O7.0505, F.S. or 617.05	er certify that when filing 0401, F.S., that all fees	

SBS MANAGEMENT 10193 CLEARY BLVD. PLANTATION, FL. 33324 954-424-0230

DIVISION OF CORPORATIONS STATE OF FLORIDA REINSTATEMENT SECTION P.O. BOX 6327 TALLAHASSEE, FL. 32314-6327

10-08-03

ATTACHED IS A COPY OF A REQUEST FOR AN ELECTRONIC ACCESS CODE THAT WOULD HAVE ALLOWED US TO FILE TIMELY AND ON LINE. UNFORTUNATELY THE LETTER WAS NEVER FOLLOWED UP NOR DID WE RECEIVE ANY FORM FOR RENEWAL IN THE MAIL. WE NOW ARE IN RECEIPT, AND HAVE FILLED OUT AS ENCLOSED A RENEWAL APPLICATION.

I AM ENCLOSING A CHECK IN THE AMOUNT OF \$150.00 AS REQUIRED. I AM REQUESTING THAT YOU ABATE ANY AND ALL LATE CHARGES AS IT IS OBVIOUSLY A MISTAKE ON BOTH OUR PARTS.

TO COMPOUND THE PROBLEM SOMEWHERE IN YOUR SYSTEM OUR ADDRESS WAS ENTERED WRONG. UNTIL THIS YEAR WE WERE ALWAYS ON TIME. I JUST NOTED THAT THE MAILING ADDRESS YOU ARE SHOWING ON THIS FORM IS 10143 AND NOT 10193.

THANK YOU

PAUL J. SADOWSKI, DPS

SBS MANAGEMENT 10193 CLEARY BLVD PLANTATION, FL. 33324 954-424-0230

DIVISION OF CORPORTATIONS STATE OF FLORIDA ATTN. INTERNET ACCESS P.O. BOX 6327 TALLAHASSEE, FL.32314

01-04-03

WE HAVE NOT RECIEVED OUR UBR FORMS FOR THE NEW YEAR.

I WOULD LIKE TO FILE ON LINE. MY DOCUMENT #IS: P94000060636

I AM MISSING MY ELECTRONIC ACCESS CODE.

KINDLY RESPOND AS SOON AS POSSIBLE SO THAT I MAY FILE

TIMELY.

THANK YOU,

PAUL J. SADOWSKI, PD SBS MANAGEMENT, INC.