

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000084242

1. Corporation Name

ALL STAR INSPECTIONS, INC.

Principal Place of Business

1041 TYLER STREET  
HOLLYWOOD FL 33019

Mailing Address

1041 TYLER STREET  
HOLLYWOOD FL 33019

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

11/17/1994

5. FEI Number

65-0559420

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	ORMSTON, LR	1041 TYLER STREET	HOLLYWOOD FL
D	ORMSTON, ANDREA J.	1041 TYLER STREET	HOLLYWOOD FL

2000008835317  
11/06/02--01121--005 \*\*150.00

8. Name and Address of Current Registered Agent

DUBOSE, ELIZABETH  
2435 HOLLYWOOD, SUITE 204  
HOLLYWOOD FL 33020

9. Name and Address of New Registered Agent

Name

ANDREA ORMSTON

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

1041 Tyler St.

Suite, Apt. #, Etc.

City

Hollywood

State  
FL

Zip Code  
33019

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

10/28/02

11. 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/28/02

Daytime Phone #

CP2E040 (8/02)

**ALL STAR INSPECTIONS, INC.**

**1041 Tyler Street**

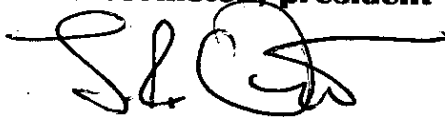
**Hollywood, Fla. 33019**

**To whom it may concern:**

**This letter is to inform the appropriate office, that the two prior UBR notices were not received at the above address. This was the first notice received this year. Please find the reinstatement form and the proper fee enclosed. Thanking you in advance.**

**Sincerely,**

**L.R.Ormston, president**

A handwritten signature in black ink, appearing to be 'L.R. Ormston', written over the typed name.