

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE**

**Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

**FILED**

**01 APR 11 PM 3:59**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

**DOCUMENT #** PA4000085405

**1. Corporation Name**

CONCORD PATROL & SECURITY, INC.  
7420 Biscayne Boulevard  
Miami Florida 33138

**2. Principal Office Address**

**3. Mailing Office Address**

7420 Biscayne Blvd same 7420 Biscayne Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Miami, Florida

Miami Florida

Zip

33138

Country

Dade

Zip

33138

Country

Dade

**4. Date Incorporated or Qualified  
To Do Business in Florida**

Nov. 21, 1994

**SP**

**5. FEI Number**

65-0558404

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☒**

**\$8.75 Additional Fee required  
for a Certificate of Status**

**REINSTATEMENT** 99-01

**7. Name and Address of Current Registered Agent**

Name

Yves L Ferrier

**100004013901-5**

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

1321 S.W. 71st Ave

~~04/17/01-01093-019~~

~~\*\*\*1058.75 \*\*\*1058.75~~

Suite, Apt. #, Etc.

City

N.Lauderdale F

State

**FL**

Zip Code

33068

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date 4-9-2001

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Yves L. Ferrier	1321 S.W. 71st Ave	N.Lauderdale, Fl. 33068
V.Pres.	Angele Ferrier	1321 S.W. 71st Ave	N.Lauderdale Fl. 33068

**10. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

YVES L. FERRIER 4-9-01 305-757-1010

Date

Daytime Phone #