

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

DOCUMENT # P95000016542

1 Corporation Name

DUALGROUP PROJECTS, INC.

95 DEC 20 AM 9:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2020 SE OCEAN BLVD
STUART, FL 34996

Mailing Address

2020 SE OCEAN BLVD 111-1
STUART, FL 34996
Sig Bjorn
604 Krueger Parkway
Stuart, FL 34996



900002046129--0

-01/03/97--01183--011

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

2 New Principal Office Address, If Applicable

604 KRUEGER PARKWAY S.E. STUART, FL 34996

4 Date Incorporated or Qualified To Do Business in Florida

02/28/1995

City & State

STUART FLORIDA

City & State

SAME

Zip

34996

Country

MARTIN

Zip

Country

5 FEI Number

Applied For

☒ Not Applicable

6

CERTIFICATE OF STATUS DESIRED

☒ \$0.75 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
D	SAMUELSEN, SIGURD B.	2929 SE OCEAN BLVD 111-1	STUART FL 34996
D	BJORN, SIGURD	604 KRUEGER PARKWAY S.E. STUART, FLORIDA (CORP FOR PROFIT)	(34996)
D	BJORN, SIGURD	604 KRUEGER PARKWAY S.E. STUART, FLORIDA (CORP FOR PROFIT)	(34996)
D	BRYAN BJORN		

REINSTATEMENT

12/30/96

8. Name and Address of Current Registered Agent

ABRAHAMSON, DALE T
900 E OCEAN BLVD
SUITE 232
STUART FL 34994

9. Name and Address of New Registered Agent

Name LEE BRYAN BJORN
Street Address (P.O. Box Number is Not Acceptable)
604 KRUEGER PARKWAY
Suite, Apt. #, Etc
City STUART State FL Zip Code 34996

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

Lee Bryan Bjorn

Date

12/26/96

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:

Sig Bjorn S.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/26/96

221-3306