

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P95000019334**

1 Corporation Name

ABC SMALL ENGINES & EQUIPMENT, INC.

FILED

96 DEC 12 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

1251 N. DIXIE HIGHWAY
BAY 1 & 3
POMPANO BEACH FL 33060

Mailing Address

1251 N. DIXIE HIGHWAY
BAY 1 & 3
POMPANO BEACH FL 33060

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

2. New Principal Office Address, If Applicable

1251 N. Dixie Highway

Suite, Apt. #, etc.

Bay #1

City & State
Pompano Beach FL

Zip
33060

Country
USA

3. New Mailing Office Address, If Applicable

1251 N. Dixie Highway

Suite, Apt. #, etc.

Bay #1

City & State
Pompano Beach FL

Zip
33060

Country
USA

4. Date incorporated or Qualified
To Do Business in Florida

03/08/1995

5. FEI Number

65 057 7782

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)

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	MAHARAJ, SHAWN	3120 5TH TERRACE 3120 N.E. 9th terrace	POMPANO BEACH FL 33064

308882028023-3
-12/12/96-01108-011
***375.00 ***375.00

REINSTATEMENT

8. Name and Address of Current Registered Agent

MAHARAJ, SHAWN
1251 N. DIXIE HIGHWAY
BAY 1 & 3
POMPANO BEACH FL 33060

9. Name and Address of New Registered Agent

Name Maharaj, Shawn
Street Address (P.O. Box Number is Not Acceptable)
1251 N. Dixie Highway
Suite, Apt. #, Etc.
Bay #1
City Pompano Beach State FL Zip Code 33060

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

Shawn R. Maharaj
REGISTERED AGENT MUST SIGN

Date 11/27/96

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:

Shawn R. Maharaj
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/27/96
Date

954-943-4799
Daytime Phone #