

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

01 JUN 14 PM 4:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P95000022741

**1. Corporation Name**

BUCK ROOFING, INC.

W01-13015

**2. Principal Office Address**

521 SW 38th Ave

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, Fl

Zip

33312

Country

Broward

**3. Mailing Office Address**

521 SW 38th Ave.

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, Fl.

Zip

33312

Country

Broward

**REINSTATEMENT 98-01**

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

3/20/95

**5. FEI Number**

650567839

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$9.75 Additional Fee required  
for a Certificate of Status

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

Name

DAVID R. FARBSTEIN, ESQ.

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

2765 W. Cypress Creek Rd., Suite D.

Suite, Apt. #, Etc.

City

Ft. Lauderdale,

State

FL

Zip Code

33309

**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

*[Signature]*

Date

5/16/01

REGISTERED AGENT MUST SIGN

**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
P/S/D	SILBURN POWELL	521 SW 38th Ave	Ft. Lauderdale, Fl 33312
VP/D	TATLYN ALEXANDER	521 SW 38th Ave.	Ft. Lauderdale, Fl 33312

**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)(b), 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: Silburn Powell]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/16/01

Daytime Phone #

954-791-3007

CR2E081 (9/00)