

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Gathered Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 MAY 21 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000026826

1. Corporation Name

Blackburn Property Maintenance Inc.

2. Principal Office Address

P.O. Box 217

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Hallandale, FL

City & State

Zip 33008 Country

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

April 11 1995

5. FEI Number

65-0569512

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Stephen Blackburn

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

2453 NE 51st.

Suite, Apt. # Etc.

D211

City

FT. Lauderdale

State

FL

Zip Code

33308

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

Stephen Blackburn

REGISTERED AGENT MUST SIGN

Date

5/17/01

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
owner	Stephen Blackburn	2453 NE 51st.	Ft. Lauderdale 33308
	201.25-AR		100004430761--8 -06/19/01--01110--010 ****300.00 ****300.00
	10.00-ARARS		
	88.75-ARARP		

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)(f), 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:

Stephen Blackburn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/17/01 (951)
662-5826

Daytime Phone #

2002

May 17, 2001

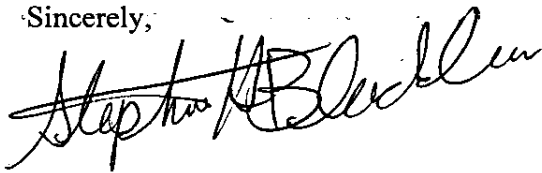
To: Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, Fl 32314
PH.#850-487-6052

From: BLACKBURN PROP. MAINT., INC.
STEPHEN BLACKBURN
P.O. Box 217
Hallandale, FL 33008-0217

Re: Corporation # P95000026826

I am writing this letter to ask you to please reinstate my articles of incorporation. I have been a corporation since 1995. This is the first time I have let my yearly renewal lapse because of a family emergency. Last year my father had a heart attack and I left for several months. My accountant failed to notify me about my dissolution last year and disclosed this information only recently. I am enclosing the hospital bill to let you know when my father was admitted. Please accept my check for calendar years 2000 and 2001 in the amount of \$300.00. Again, I apologize for this error on my part and hope that you will understand my circumstances. Please notify me if you need any additional information. I can be reached by phone at (954) 662-5826.

Sincerely,

A handwritten signature in cursive script, appearing to read "Stephen H. Blackburn".

Stephen H. Blackburn
BLACKBURN PROPERTY MAINTENANCE