

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P95000071035

1. Entity Name
ULTIMATE FIRE AND SAFETY, INC.



FILED

05 OCT 13 PM 3:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



09282005 REIN-P CR2E098 (6/04)

4. FEI Number
65-0631362

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHARLES D BORTZ, JR.
3330 NW 95 TERRACE
SUNRISE, FL 33351

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Signature, typed or printed name of registered agent, and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

9/28/05
DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|------------------------|---------------------------------|
| TITLE | PDST | <input type="checkbox"/> Delete |
| NAME | BORTZ, CHUCK | |
| STREET ADDRESS | 3330 N.W. 95TH TERRACE | |
| CITY-ST-ZIP | SUNRISE, FL 33351 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | | |
|----------------|----------------------|---|
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 1000607734 | |
| STREET ADDRESS | 10/19/05--01053--003 | |
| CITY-ST-ZIP | **150.00 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/28/05
Date

Daytime Phone #

MARKROB ACCOUNTING SERVICE, INC.

PO BOX 771210
CORAL SPRINGS, FL. 33077-1210
954.346.7288-BROWARD 954.346.7217-FAX
954.434.5996-S.BROWARD 305.621.9382-DADE

09/28/05

Florida Dept of State
Annual Reports Filings
Division of Corporations
PO BOX 6327
Tallahassee, Fl. 32314

Re: Corporate Renewals

Ultimate Fire & Safety, Inc.
P95000071035

To Whom It May Concern:

We are requesting acceptance of the enclosed filing for the 2005 Uniform Business report for our client Ultimate Fire & Safety, Inc.

While in our office we determined the client had not filed his 2005 corporate renewal, the client advised us that he had not received any notification from the state due to an address change and could we assist him with the renewal.

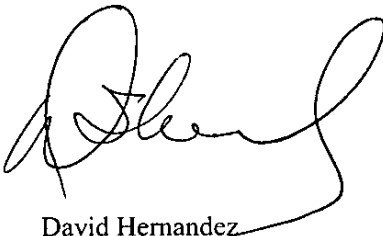
We therefore printed a new UBR report and determined that under FS 607.193(2)(b), since the client had not received notification the penalty can be waived.

We therefore request acceptance of the 2005 UBR as filed and to waive any penalty as they had not received notification.

The client has been made aware of the requirements for future filings.

Should you have any questions, please feel free to contact the client.

Thank you,
Sincerely,

A handwritten signature in black ink, appearing to read 'David Hernandez', with a stylized, flowing script.

David Hernandez