

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 FEB 17 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000081790
1. Corporation Name BOYS-N-GRILLS, Inc.

2. Principal Office Address
1032 NE 16th Ave.

Suite, Apt. #, etc.
#3

City & State
Fort Lauderdale, FL

Zip 33304 **Country** USA

3. Mailing Office Address
Same

Suite, Apt. #, etc.

City & State

Zip **Country**

REINSTATEMENT 98-00

**4. Date Incorporated or Qualified
To Do Business in Florida** 10/25/95

5. FEI Number
65-0614921

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ **\$875 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

Curt Levit

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

1032 NE 16th Ave., #3

Suite, Apt. #, Etc.

#3

City

Fort Lauderdale

State
FL

Zip Code
33304

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**

Curt Levit

Date 2/14/00

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
PSD -	Curt Levit	1032 NE 16th Ave. - #3	Fort Lauderdale, FL 33304

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)(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:

Curt Levit

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/14/00

Date

(754) 926-1090

Daytime Phone #

CR2E081 (9/99)