

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000090985

1. Corporation Name

PB Affordable Transportation, Inc.

Principal Place of Business

Mailing Address

624 S. Military Trail

same

West Palm Beach, FL 33415

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 97-99

4. Date Incorporated or Qualified
To Do Business in Florida

11/28/95

5. FEI Number

65-0628013

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
P/D	David H. Brotman	624 S. Military Trail	West Palm Beach, FL 33415
T/S/D	Michael Brotman	624 S. Military Trail	West Palm Beach, FL 33415
VP/D	Carlos A. Datena	624 S. Military Trail	West Palm Beach, FL 33415

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-07/27/99--01023--015
***1050.00 ***1050.00

8. Name and Address of Current Registered Agent

Stanley Hyman
224 Datura Street, Ste. 1417
West Palm Beach, FL 33401

9. Name and Address of New Registered Agent

Name
Michael Brotman
Street Address (P.O. Box Number is Not Acceptable)
624 S. Military Trail
Suite, Apt. #, Etc.

City
West Palm Beach

State
FL

Zip Code
33415

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

REGISTERED AGENT MUST SIGN

Date

7/9/99

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

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 taxes 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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/9/99

Date

561-478-0301

Daytime Phone #

CR2E001 (12/98)