

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000008186

W99-5952

93 MAY 12 AM 9:07

STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

Three Guys Line Service, Inc.

Principal Place of Business

Mailing Address

8765 S.W. 58th Street
Cooper City, Fl. 33328

REINSTATEMENT

97-99

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

2. New Principal Office Address, If Applicable

7750 Pines Blvd.
Suite, Apt. #, etc.

Box 12
City & State

Hollywood, Fl.
Zip Country
33024 USA

3. New Mailing Office Address, If Applicable

Same
Suite, Apt. #, etc.

City & State

Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

1/25/96

5. FEI Number

65-0638855

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
D	Anthony Battle	6132 Funston Street, #3	Hollywood, Fl. 33023
D	Raymond Kurtz	8765 S.W. 58th Street,	Cooper City, Fl. 33328
D	George Baker	4186 S.W. 48th Court	Ft. Lauderdale, Fl. 33314

8. Name and Address of Current Registered Agent

William D. Beamer
1290 East Oakland Park Blvd.
Suite 101
Ft. Lauderdale, Fl. 33334

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

400002886214--8

05/25/99--01073--025

***1058.75 ***1058.75

State Zip Code

FL

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 April 26, 1999

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 fees owed by the corporation have been paid and the names of individual's 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 3 MAY 99 (950) 6482826
Date Daytime Phone #