

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000021276

1 Corporation Name

J&A SANITATION, INC.

Principal Place of Business

Mailing Address

499 EAST PALMETTO PARK ROAD
SUITE 227
BOCA RATON, FLORIDA 33432

REINSTATEMENT

98 DEC 22 PM 6:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

2. New Principal Office Address, If Applicable

2441 NORTHWEST 15TH COURT 2441 NORTHWEST 15th

Suite, Apt. #, etc.

N/A

City & State

POMPANO BEACH, FLORIDA

Zip

33069

Country

U.S.A.

3. New Mailing Office Address, If Applicable

2441 NORTHWEST 15th

Suite, Apt. #, etc.

N/A

City & State

POMPANO BEACH, FLORIDA

Zip

33069

Country

U.S.A.

4. Date incorporated or Qualified
to do Business in Florida

COURT

03/05/96

5. FEI Number

68-0653022

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/D	PORTER, JOHN	2441 NW 15TH COURT	POMPANO BEACH, FL. 33069
V/D	MASIELLO, ANTHONY	2441 NW 15TH COURT	POMPANO BEACH, FL. 33069

200002725362-2
-12/29/98-01080-023
****308.75 ****308.75

8. Name and Address of Current Registered Agent

PUTTER, WILLIAM L.
499 EAST PALMETTO PARK ROAD
SUITE 227
BOCA RATON, FLORIDA

9. Name and Address of New Registered Agent

Name
RICHARD J. DESANTO, ESQUIRE
Street Address (P.O. Box Number is Not Acceptable)
2601 EAST OAKLAND PARK BLVD.
Suite, Apt. #, Etc.
SUITE 501
City
FORT LAUDERDALE
State
FL
Zip Code
33306

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

Richard J. Desanto, Esquire
REGISTERED AGENT MUST SIGN

Date 12/21/98

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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 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: y

John Porter, Director
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOHN PORTER, DIRECTOR & PRESIDENT

Date

Daytime Phone #

12/17/98 954-968-6268

CR2E040 (12/96)