

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 DEC 30 PH 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000065602

1. Corporation Name

BRANDSMART REALTY CORP.

Principal Place of Business

Mailing Address

~~4320 NW 167 STREET~~
~~MIAMI FL 33054~~

~~4320 NW 167 STREET~~
~~MIAMI FL 33054~~

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

2. New Principal Office Address, If Applicable

3700 SW 42 ST
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

3700 SW 42 ST
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

08/06/1996

5. FEI Number

65-0882607

Applied For

Not Applicable

City & State

HOLLYWOOD FL

City & State

HOLLYWOOD FL

Zip

33314

Country

Zip

33314

Country

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
DPST	PERLMAN, ROBERT	4500 CASPER STREET 3700 SW 42 ST	HOLLYWOOD FL 33021 HOLLYWOOD, FL 33314
D	PERLMAN, SHARON	4500 CASPER STREET 3700 SW 42 ST	HOLLYWOOD FL 33021 HOLLYWOOD, FL 33314
			400002735684--5 -01/08/93--01122--007 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

YOUNG, PAUL
1630 NORTH FEDERAL HIGHWAY
FORT LAUDERDALE FL 33305

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

12-28-98

11. This corporation owes or has paid 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/28/98

954 797 4000

Daytime Phone #

CR2ED040 (9/98)