

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 FEB 27 PM 3:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000088215

1. Corporation Name

DE LA FLOR FLORIST OF CORAL SPRINGS, INC.

Principal Place of Business

~~8837 WEST SAMPLE ROAD~~
~~CORAL SPRINGS FL 33065~~

Mailing Address

~~8837 WEST SAMPLE ROAD~~
~~CORAL SPRINGS FL 33065~~

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.

13320 STIRLING Rd
FT. LAUDERDALE FL

Suite, Apt. #, etc.

13320 STIRLING Rd
FT. LAUDERDALE FL

Zip 33330 Country B.R.O.

Zip 33330 Country B.R.O.

4. Date Incorporated or Qualified
To Do Business in Florida

10/25/1996

5. FEI Number

65-0722894

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
PD	GREGORY, DIANE	8837 WEST SAMPLE ROAD	CORAL SPRINGS FL 33065
VTD PD	DELAFLOR, DEBORAH	8837 WEST SAMPLE ROAD 13320 Stirling Rd	CORAL SPRINGS FL 33065 33330 Ft Lauderdale FL
SD VTD	DELAFLOR, AUGUSTO	8837 WEST SAMPLE ROAD 13320 Stirling Rd	CORAL SPRINGS FL 33065 Ft. Lauderdale FL 33330
			200002448232--3 -03/05/98--01067--007 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DELAFLOR, AUGUSTO

~~8837 WEST SAMPLE ROAD~~ 13320 Stirling Rd.
CORAL SPRINGS FL 33065 Ft. Lauderdale FL
33330

Name

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

Suite, Apt. #, Etc.

City

200002448232--3

-03/05/98--01067--008

****150.00 ****150.00

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

Augusto De la Flor
REGISTERED AGENT MUST SIGN

Date 2-26-98

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:

Augusto De la Flor
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-98

Date

Daytime Phone #