

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 NOV 23 AM 8:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA7000000576

1. Corporation Name

REEF 'N RAIL, Inc.

Principal Place of Business

5242 SW 34th St.
Davie, FL 33314

Mailing Address

5242 SW 34th St
Davie, FL 33314

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

4. Date Incorporated or Qualified
To Do Business in Florida

Jan. 2, 1997

5. FEI Number

65-0718306

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 98

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
Pres/ Vice Pres	John M. Petrisin	5242 SW 34th St	Davie, FL 33314
Treas/ Sec	Richard M. Snyder	5242 SW 34th St	Davie, FL 33314

600002705826--6
-12/08/98--01039--001
***750.00 ***750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

John M. Petrisin

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

5242 SW 34th St

Suite, Apt. #, Etc.

City

Davie

State

FL

Zip Code

33314

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

John M. Petrisin

REGISTERED AGENT MUST SIGN

Date

11/17/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒

No ☐

Paid 3/19/98 (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:

John M. Petrisin Pres. John M. Petrisin

Date

11/12/98

Daytime Phone #

954-584-8061

CR2040 (1/98)