

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # P97000005978

1. Corporation Name

D & S MOTEL INVESTMENT, INC.

00 NOV 30 AM 10: 37

Principal Place of Business

Mailing Address

1115 W. NORTH BLVD.
LEESBURG FL 34748

1115 W. NORTH BLVD.
LEESBURG FL 34748

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

4. Date Incorporated or Qualified
To Do Business in Florida

01/21/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3423466

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	City / State / Zip
1	2	3	4
PD	PATEL, DHARMENDRA M	1115 W. NORTH BLVD.	LEESBURG FL 34748

400003496644-6
-12/12/00--01032--006
****158.75 ****158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PATEL, DHARMENDRA M
1115 W. NORTH BLVD.
LEESBURG FL 34748

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

Dharmendra Patel
REGISTERED AGENT MUST SIGN

Date 10-18-00

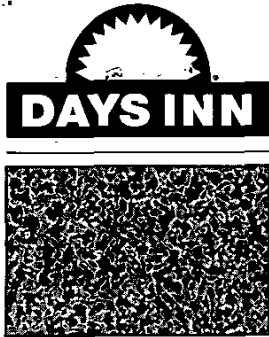
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the 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:

Dharmendra Patel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-18-00

Date Daytime Phone #



②

NOV-27th-2000

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORP.

SUBJECT: D&S MOTEL INVESTMENT, INC
REF. NO : P97000005978

PLEASE LET IT BE KNOWN THAT THIS CORP.
NEVER RECEIVED ANNUAL RENEWAL NOTICE.
THERE FOR I REQUEST YOU WAVIER THE REINSTATEMENT
FEE AND FILING FEE.

ENCLOSE PLEASE FIND MY CHECK \$158.75
USE THIS APPLICATION AS RENEWAL

THANK YOU!

DHARMENDRA PATEL

D&S MOTEL INVESTMENT, INC.

352-787-3131