

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 NOV 23 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000020493

1. Corporation Name

T & N BRICKS INC.

Principal Place of Business

Mailing Address

2430 58TH STREET S.
TAMPA FL 33619

2430 58TH STREET S.
TAMPA FL 33619

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

02/28/1997

5. FEI Number

59-3435073

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)

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
P	SMIRCIC, THOMAS ANTHONY	2430 58TH STREET S.	TAMPA FL 33619

000002702290--4
-12/03/98--01094--019
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SMIRCIC, THOMAS A
2430 58TH STREET S.
TAMPA FL 33619

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

Thomas A. Smircic

REGISTERED AGENT MUST SIGN

Date

11/20/98

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)(f), 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:

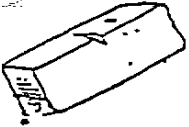
Thomas A. Smircic
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
THOMAS A. SMIRCIC

11/20/98
Date

813-626-7176
Daytime Phone #

CR22040 (9/98)

T & N BRICKS, INC.



wfz

Dept. of State,
Division of Corporations,
P.O. Box 6327,
Tallahassee, Fl., 32314

Doc #P97000020493

Dear Sir or Madam:

Please be advised that we were never informed of this being due nor did we receive our Annual Report.

I have spoken with one of your employees and he has advised me that you are not required to send these out and this year only they are accepting \$150.00 to reinstate but that next year we will have to advise you if we don't receive it.

All of this paperwork is so difficult for a small corporation to keep track of. I wish there could be an easier way.

I am enclosing \$150.00 for reinstatement.

Sincerely,


Thomas A. Smircic

