

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONSFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT 21 PM 2:04DOCUMENT # **P97000052726**

Corporation Name

STUART AUTO BODY, INC.

Principal Place of Business

Mailing Address

1649 SE FAIRMONT STREET
STUART FL 349972649 SE FAIRMONT STREET
STUART FL 34997

400023961884

10/21/03--01027--008 **150.00

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

06/13/1997

5. FEI Number

65-0770823

At

ec For

No

pplicable

6. CERTIFICATE OF STATUS DESIRED ☐\$8.75: Additional
for a Certificatee required
t Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director	4. City / State / Zip
D	TARANTINO, EDWARD A	2649 SE FAIRMONT STREET	STUART FL 34997
D	TARANTINO, NADINE	2649 SE FAIRMONT STREET	STUART FL 34997

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

TARANTINO, EDWARD A
2649 SE FAIRMONT STREET
STUART FL 34997

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Date

REGISTERED AGENT MUST SIGN

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 if 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., the debts 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 in this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Filing
Fees
Indicated

SIGNATURE:

Nadine Tarantino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

10-15-03

(2)

October 15, 2003

Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, Florida 32314-6327

RE: Document #P97000052726
Stuart Auto Body, Inc./ UBR notices *2003*

Please be advised that as of this date we have not received any prior UBR notices. We are submitting this copy as you have requested with our \$150.00 check enclosed.

We are mailing this overnight to expedite our paperwork. Thank you kindly for your prompt attention to this matter.

Sincerely yours,



Nadine Tarantino, V. P.
Stuart Auto Body, Inc.
2649 SE Fairmont Street
Stuart, Florida 34997

Stuart Auto Body
2649 S.E. FAIRMONT ST.
STUART, FLORIDA 34997