

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED 10/2
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT 18 PM 6:36

DOCUMENT # P97000066142

1. Corporation Name

PB STEEL, INC.

Principal Place of Business

461 EAST HILLSBORO BLVD.
#200
DEERFIELD BEACH FL 33441

Mailing Address

461 EAST HILLSBORO BLVD.
#200
DEERFIELD BEACH FL 33441

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

07/29/1997

5. FEI Number

65-0772104

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	BUTKERAIT, BRIAN	461 EAST HILLSBORO BLVD. STE. 20	DEERFIELD BEACH FL 33441

300004663593--1
-11/02/01--01012--013
****150.00 ****150.00

SP

8. Name and Address of Current Registered Agent

COVE, ANDREW N
225 S. 21ST NE
HOLLYWOOD FL 33020

9. Name and Address of New Registered Agent

Name: BRIAN T. BUTKERAIT
Street Address (P.O. Box Number is Not Acceptable)
5325 FLAMINGO CT
Suite, Apt. #, Etc.
COCONUT CREEK
City: State: FL Zip Code: 33073

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10-17-01

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BRIAN T. BUTKERAIT

Date

10-17-01

Daytime Phone #

800 606-8424

CR2E040 (8/01)



CORPORATE HEADQUARTERS
461 EAST HILLSBORO BOULEVARD
DEERFIELD, FL 33441

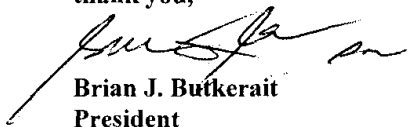
October 17, 2001

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

FEI # 65-0772104

Please be advised that we have never received a Division of Corporations Renewal Notice from your office. This Notice of Administrative Dissolution is the first correspondence received from your office for this year. We are therefore enclosing the normal fee of \$150.00 and request a reinstatement as soon as possible.

thank you,


Brian J. Butkerait
President

2002