

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 12 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PG7000075458
1. Corporation Name FLORIDA BUSINESS CONCEPTS INC.

Principal Place of Business Mailing Address
125 WEST VENICE AVENUE SARASOTA
VENICE FL 34285

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable SARASOTA FL VENICE AV
Suite, Apt #, etc.
City & State VENICE
Zip FL Country USA

3. New Mailing Office Address, If Applicable SARASOTA
Suite, Apt. #, etc.
City & State
Zip Country

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4. Date Incorporated or Qualified To Do Business in Florida 10/10/71

5. FEI Number 65-0787049 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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
<u>SID. VP.</u> <u>PRVD</u>	<u>SERGIO VAN PELT</u>	<u>14 EAST LAUREL ROAD</u> <u>ARACONIS FL</u>	<u>NOKONIS FL 34272.</u>

4000002689514-0
-11/17/98-01051-019
****750.00 ****750.00

8. Name and Address of Current Registered Agent

7AENSCH, R. CHRISTOPHER
3400 S. TARIAMI TRAIL SUITE 303
SARASOTA FL 34234

9. Name and Address of New Registered Agent

Name S. VAN PELT
Street Address (P.O. Box Number is Not Acceptable)
125 WEST VENICE AVENUE
Suite, Apt. #, Etc.
City VENICE State FL Zip Code 34285

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]
REGISTERED AGENT MUST SIGN

Date 11/09/98

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)(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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SERGIO VAN PELT

11/09/98 (41) 488 0828
Date Daytime Phone #