

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 23 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000094372

1. Corporation Name

SAWGRASS TRADING COMPANY, INC.

Principal Place of Business

Mailing Address

1272 BROMPTON PLACE
HEATHROW FL 32746

1272 BROMPTON PLACE
HEATHROW FL 32746

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.

13701 N.W. 22ND ST.

City & State

SUNRISE, FL

Suite, Apt. #, etc.

P.O. Box 451555

City & State

SUNRISE FL

Zip

33323

Country

USA

Zip

33345

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/04/1997

5. FEI Number

65-0794814

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 (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	DAPRIZIO, JEFF	13701 NW 22ND STREET	SUNRISE FL 33323

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DAPIZIO, DAVID
1272 BROMPTON PLACE
HEATHROW FL 32746

Name

STACEY DAPRIZIO

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

13701 N.W. 22ND ST.

Suite, Apt. #, Etc.

City

SUNRISE

State

FL

Zip Code

33323

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 12-16-98

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-17-98

Daytime Phone #

9548450012

②

Sawgrass Trading Company

P.O. Box 451555

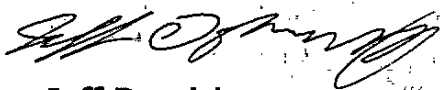
Sunrise, Florida 33345

Phone: (954) 845-0012 Fax: (954) 845-0014

Date: 11-17-98
To: DEPARTMENT OF STATE
From: Jeff Daprizio
RE: LATE PAYMENT

Please accept this payment of \$ 150.00 for fees due to the Department of State. We incorporated in November of 1997. This was the first notice we received. We are an S chapter corporation and did file a 1997 federal tax return. I have made changes to the registered agent so this will not happen again. Please accept our apologies and thank you for your support!
If you need to contact me, I can be reached at 954-845-0012.

Sincerely,



Jeff Daprizio