

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. Pg 1 of 8

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Janet B. McMan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000094795

1. Corporation Name

LUCKY DOG ENTERPRISES, INC.

Principal Place of Business

Mailing Address

7650-S TAMiami TRAIL UNIT 3 SARASOTA FL 34231
1959 BARBER RD SARASOTA FL 34240

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

2. New Principal Office Address, If Applicable

1959 BARBER RD
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

1959 BARBER RD
Suite, Apt. #, etc.

City & State

SARASOTA FL

City & State

SARASOTA, FL

Zip

34240 SARASOTA

Zip

34240 SARASOTA

4. Date Incorporated or Qualified To Do Business in Florida

11/05/1997

5. FEI Number

65-0796182

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
PSTD	KIRBY, MICHAEL J	7650-S TAMiami TRAIL, UNIT 3	SARASOTA FL 34231
PSTD	KIRBY, MICHAEL J.	1959 BARBER RD	SARASOTA, FL 34240

500002703805--3
-12/04/98--01107--003
****158.00 ****158.00

8. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name MICHAEL J KIRBY
Street Address (P.O. Box Number is Not Acceptable) 1959 BARBER RD
Suite, Apt. #, Etc.
City SARASOTA State FL Zip Code 34240

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

SICM - J. KIRBY
REGISTERED AGENT MUST SIGN

Date 11/19/98

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:

MICHAEL J KIRBY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/19/98 941-342-0441

Daytime Phone #

CR2E040 (9/98)

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SOUTHWEST FLORIDA WATER CONSULTANTS

1959 Barber Road
Sarasota, Fl. 34240
EMERGENCY SERVICE 24 HOURS/7 DAYS
Phone (941) 342-0441
Fax (941) 377-7247

November 18, 1998

Florida Department of State
Division Of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

Dear Sirs,

Please find enclosed a properly addressed correspondence from the State of Florida regarding some tax liabilities.

Hopefully this will serve as evidence that a change of address has been previously submitted to the state.

We never received the notice that our annual report was delinquent possibly because the address change was not properly noted. This document was forwarded to our new address, yet the original notice of delinquency was not.

Please accept our apologies and allow us the one time waiver as the mix up in address could have occurred at either side of the communication.

Thank You,


M.J. Kirby