

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 SEP 10 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000011067

1. Corporation Name

2841 Enterprise Inc.

2. Principal Office Address - No P.O. Box #
2031 N.E. 54th Street

Suite, Apt. #, etc.

City & State
Ft Lauderdale

Zip
33308

Country
USA

3. Mailing Office Address
2031 N.E. 54th St

Suite, Apt. #, etc.

City & State
Ft Lauderdale

Zip
33308

Country
USA

CR2E081 (1/07)

4. Date Incorporated or Qualified
To Do Business in Florida **04/01/1998**

5. FEI Number
65-0183937

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Mary Jean Pavicic

Street Address (P.O. Box Number is Not Acceptable)
2031 N.E. 54th Street

Suite, Apt. #, Etc.

City
Ft. Lauderdale

State Zip Code
FL 33308

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Mary Jean Pavicic
REGISTERED AGENT MUST SIGN

Date **07/30/2007**

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Mary Jean Pavicic	2031 N.E. 54th Street	Ft Lauderdale, FL 33308

700109588777
09/18/07--01059--015 **150.00

10. 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 contained in Chapter 119, 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

07/30/2007

Date

407 297-3700

Daytime Phone #

July 30, 2007

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL


This letter is to inform you that 2841 Enterprises, Inc. has never received their reinstatement notice for 2007. Due to these circumstances we are asking that you abate the reinstatement fees. The payment of \$150.00 is enclosed for the said year. If there are any questions concerning this matter please feel free to contact me at 407 297-3700. The Document # P98000011067.

Your consideration concerning this matter is greatly appreciated.

Cordially,



Barbara J. Adams
Accountant



2841 Enterprises, Inc. President