

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION <b>99A</b> REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 NOV -1 PM 12:39

DOCUMENT # **P98000011478**

1. Corporation Name

**BRIGANTE & SONS ENTERPRISES, INC.**

Principal Place of Business

263 SANTA ROSA DRIVE  
WINTER HAVEN FL 33884

Mailing Address

263 SANTA ROSA DRIVE  
WINTER HAVEN FL 33884



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

02/05/1998

5. FEI Number

65-081266

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	4. City / State / Zip
D	BRIGANTE, ANDREW	263 SANTA ROSA DRIVE	WINTER HAVEN FL 33884
D	BRIGANTE, ANDREW J	263 SANTA ROSA DRIVE	WINTER HAVEN FL 33884
D	<del>BISHOP, WILLIAM F</del>	<del>815 EAGLE AVE</del>	<del>EAGLE LAKE FL 33839</del>
D	BRIGANTE, MAUREEN	263 SANTA ROSA DRIVE	WINTER HAVEN FL 33884
D	BRIGANTE, JOSEPH	263 SANTA ROSA DRIVE	WINTER HAVEN FL 33884
			11/14

8. Name and Address of Current Registered Agent

BRIGANTE, ANDREW  
263 SANTA ROSA DRIVE  
WINTER HAVEN FL 33884

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number) **1010000038527--5**

Suite, Apt. #, Etc.

11/08/99-01117-018  
\*\*\*\*\*150.00 \*\*\*\*\*150.00

City

State  
**FL**

Zip Code

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

*Andrew Brigante*  
REGISTERED AGENT MUST SIGN

Date **10-25-99**

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:

*Andrew Brigante*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Andrew BRIGANTE

Date **10-25-99**

Date

Daytime Phone #

941-324-7440

CS2E040 (8/99)

## ***Service First Electric***

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Post Office Box 1511  
Winter Haven, FL 33882-1511  
941/324-8548

TO THE DEPT OF STATE,

I RECEIVED A LETTER OF DISSOLUTION, ON OCT 21ST 1999,  
I CALLED THE STATE AND TALKED TO A MICHELLE MILLIGAN AND  
EXPLAINED TO HER I HAD SENT OUT A CHECK FOR OUR CORPORATION  
PAPERS ON APRIL 10TH OF 1999, IT EVIDENTLY WAS NEVER RECEIVED  
BY YOUR OFFICE. MICHELLE ADVISED ME TO SEND A NEW CHECK IN THE  
AMOUNT OF \$150.00 TO KEEP OUR CORPORATION IN GOOD STANDINGS,  
PLEASE ACCEPT MY CHECK AND APPOLOGIES FOR THE MISTAKE,

SERVICE FIRST ELECTRIC  
ANDREW BRIGANTE

