

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

9/10/2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 FEB 19 PM 3:19

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # **98000086935**

1. Corporation Name

**H & P Enterprises of Tampa, Inc.**

2. Principal Office Address

**12088 Anderson Rd.**  
**Tampa**

3. Mailing Office Address

**12088 Anderson Rd.**  
**Tampa**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**Tampa, FL**

City & State

**Tampa, FL**

Zip

**33625**

Country

**US**

Zip

**33625**

Country

**US**

4. Date Incorporated or Qualified  
To Do Business in Florida

**10-1998**

5. FEI Number

**59-3543939**

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

**Heidrun A. Fritz**

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

**5703 Imperial Key**

Suite, Apt. #, Etc.

**600003783146-2**

**02/27/01-01095-015**

**\*\*\*\*700.00 \*\*\*\*700.00**

City

**Tampa**

State

**FL**

Zip Code

**33615**

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

**Heidrun A. Fritz**  
REGISTERED AGENT MUST SIGN

Date **2-16-01**

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
Pres.	Heidrun A. Fritz	5703 Imperial Key	Tampa, FL 33615
Secy.	Peter H. Fritz	5703 Imperial Key	Tampa, FL 33615
		✶ 55000	2000 UBR
		✶ 15000	2001 UBR
			JM

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 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:

**Heidrun A. Fritz**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-16-01**

Date

**(813) 969-3989**

Daytime Phone #

CR2E081 (9/00)

pg 2 of 2

**H & P Enterprises of Tampa, Inc.**  
**12088 Anderson Rd.**  
**Tampa, FL 33625**

February 16, 2001

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Corporate Reinstatement

To Whom It May Concern:

Enclosed please find copies of the Uniform Business Report, check #2132, and the postmarked exterior of the envelope sent on September 1, 2000.

It has recently been brought to our attention that H & P Enterprises of Tampa, Inc. has been dissolved. After making our inquiries with your department it was apparent that our renewal form and check were not received.

A stop payment request was issued with our bank once it was confirmed that check #2132 had not been cashed.

During my telephone conversation with one of your representatives, I was told that we should submit a written explanation of the circumstances that transpired along with the reinstatement form and a check in the amount of \$700.00 (the fee that was initially being paid in September of \$550.00 and a fee of \$150.00 for the current year).

Thank you in advance for your assistance in this matter. Please do not hesitate to contact me with any questions or if further information is needed.

Sincerely,



Claudine G. Leuthauser  
Office Manager