

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR

2000 UBR



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

FILED

00 NOV 15 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000065074

1. Corporation Name

BARTOSCH PROPERTY MANAGEMENT, INC.

Principal Place of Business

Mailing Address

4901 SW 65 AVE
DAVIE FL 33314

4901 SW 65 AVE
DAVIE FL 33314



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

2. New Principal Office Address, If Applicable
6069 S.W. 54 COURT

3. New Mailing Office Address, If Applicable
6069 S.W. 54 Ct.

4. Date Incorporated or Qualified
To Do Business in Florida

07/22/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

☒ Applied For
☐ Not Applicable

City & State
Davie, Florida

City & State
Davie, FL

Zip
33314

Country
U.S.

Zip
33314

Country
U.S.

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
P/D	BARTOSCH, GEORGE	4901 SW 65 AVE 6069 SW 54 COURT	DAVIE FL 33314
V/D	Cullen, Ashley	4801 S.W. 58 AVE	DAVIE, FL 33314

000003505720--7
12/18/00-01052-019
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

H A INCORPORATED
308 NW 101 TERRACE
CORAL SPRINGS FL 33071

Name
Suzy Bartosch
Street Address (P.O. Box Number is Not Acceptable)
6069 S.W. 54 COURT
Suite, Apt. #, Etc.
DAVIE, FL 3

City
DAVIE
State
FL
Zip Code
33314

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

Suzy Bartosch
REGISTERED AGENT MUST SIGN

Date NOV. 9, 2000

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-9-00 (954) 327-1593

Date Daytime Phone #

CR2E040 (8/00)

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Bartosch Property Management, Inc.
6069 S.W. 54 Court
Davie, Fl 33314
(954)327-1593

To Whom it may concern,

- I recently received a notice of dissolution/revocation of our corporation. We recently moved therefor we didn't receive the first notice of renewal. Please review our application for reinstatement. Thank you.

Sincerely,

A handwritten signature, possibly reading "P. Bartosch", is written in black ink. It consists of a large, stylized capital letter 'P' followed by a smaller, less distinct signature.