

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM *Page 1 of 2*

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC -3 PM 1:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

99000075400

1. Corporation Name

Business Support & Consulting
Group, Inc.

2. Principal Office Address

7758 NW 44 ST

Suite, Apt. #, etc.

City & State

Sunrise FL

Zip

33351

Country

U.S.A

3. Mailing Office Address

7758 NW 44 ST

Suite, Apt. #, etc.

City & State

Sunrise FL

Zip

33351

Country

U.S.A

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0941118

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

ANTOLIN PESTANO JR.

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

7758 NW 44 ST

Suite, Apt. #, Etc.

City

Sunrise

State

FL

Zip Code

33351

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

Antolin Pestano Jr.

Date 11/15/02

REGISTERED AGENT MUST SIGN

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	Luis E. Zea	9330 SW. 61 ST	BOCA RATON FL 33428
VP1	Ana Bunn	2049 Polo Garden Dr.	West Palm Beach FL 33411
VP2	ANTOLIN PESTANO	7758 NW 44 ST	Sunrise FL 33351

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:

Antolin Pestano Jr.

ANTOLIN PESTANO JR., VP

11/15/02

454/578-0014

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/00)

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BUSINESS SUPPORT & CONSULTING GROUP, INC.

November 15, 2002

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

Re: Reinstatement

Gentleman:

Attached please find the Corporation Reinstatement Form. Please know that we never received a UBR for 2001. As a result this corporation became inactive. We request that the corporation be reissued and that you accept the enclosed check for \$150.00. The additional penalties should be waived since we never received the UBR and just now became aware of the inactive status of our company. These are obviously events beyond our control.

Your anticipated cooperation is most appreciated.

Cordially,



A. Pesatno Jr., CFE
Vice President

Cc. Blum
Zea

7758 NW 44 St.
Sunrise, FL 33351
Tel. 954/578-0016 954/578-0711
Tonypestano@shadow.net