

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

03 JAN 10 PM 1:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000088055

1. Corporation Name

BOARDWALK ENTERPRISES OF SOUTH FLORIDA, INC.

2. Principal Office Address

2750 SUNRISE LAKES DRIVE WEST

Suite, Apt. #, etc.

SUITE 110

City & State

SUNRISE, FL

Zip

33322

Country

USA

3. Mailing Office Address

2750 SUNRISE LAKES DRIVE WEST

Suite, Apt. #, etc.

SUITE 110

City & State

SUNRISE, FL

Zip

33322

Country

USA

REINSTATEMENT 00-03

**4. Date Incorporated or Qualified
To Do Business in Florida**

OCTOBER 6, 1999

5. FEI Number

650 952 476

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

ROBERT D. BOUDREAU

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

2750 SUNRISE LAKES DRIVE WEST

Suite, Apt. #, Etc.

SUITE 110

City

SUNRISE

State
FL

Zip Code

33322

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

Robert D. Boudreau

REGISTERED AGENT MUST SIGN

Date

1-8-03

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
P/V T/S	ROBERT D. BOUDREAU	2750 SUNRISE LAKES DR WEST SUITE 110	SUNRISE FL 33322

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.

Robert D. Boudreau PRES.

SIGNATURE:

ROBERT D. BOUDREAU PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-8-03

Date

Daytime Phone #

954-336-6687

CR2E081 (9/99)