APPLICATION **FOR** REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000100226

1. Corporation Name

A.C. ENTERPRISES OF BROWARD COUNTY, INC.





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SECRETARY OF STATE TALLAHASSEE, FLORIDE

Principal P	lace of Business	Mailing Add	Mailing Address		,	
4976 S.W. 121 AVENUE COOPER CITY FL 33330			4976 S.W. 121 AVENUE COOPER CITY FL 33330			
If above s	addrasses are incorrect in any way	سر line through incorrect	information and enter correction be	low	•	
	ncipal Office Address, If Applicable		ling Office Address, If Applicable		porated or Qualified	
			д (др		To Do Business in Florida	
Suite, Apt.	#, etc.	Suite, Apt. #	Suite, Apt. #, etc.		5. FEI Number — Applied For —	
Cib. 9 Ct-4		City & Chata	City & State			
City & State		City & State	City & State		65-0968011 Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICA	TE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status	
7. Names	and Street Addresses of Each Office	er and/or Director (FI	orida nonprofit corporations must lis	st at least 3 directors)		
Title(s)	Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director		City / State / Zip	
D	CARTER, ANTHONY J		4976 S.W. 121 AVENUE		COOPER CITY FL 33330	
			R		*****900.00 *****900.00	
	9 Name and Address of C	urrent Pagistered As		1 O Name and	Address of New Projectored Agent	
Name and Address of Current Registered Agent N				9. Name and Address of New Registered Agent Name		
4976	ER, ANTHONY J S.W. 121 AVENUE PER CITY FL 33330	- 	Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.			
4			City State Zip Code			
Signature of Registered .	that I am an officer or director or th	REGISTERED A	SENT MUST SIGN	on as provided for in ch	Date 3/2/2001	
this rein	statement application, the reason f	or dissolution has been	n eliminated, the corporate name sa	itisfies the requirement	s 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.

ME OF SIGNING OFFICER OR DIRECTO

CARTER 3/2/2001 252-2



A.C. Enterprises of Broward Co., Inc.

March 2, 2001

Florida Department of State

Dear Sir or Madam:

On November 16, 1999, I incorporated my business, A.C. Enterprises of Broward — County, with the state of Florida. It has taken me until now to construct my business and get ready to open to the public. When I went to apply to collect sales tax, I found out that my corporation was in an inactive status. After talking with one of your representatives by telephone, I found out that I was to file an annual report with the state, although I was not open for business. All correspondences I received from other government entities, e.g. federal quarterly tax returns and federal unemployment tax were to be disregarded until I was open for business. All correspondence I received from the IRS or State of Florida was filed in a folder until I opened for business. It was in this file that I found the notice of dissolution letter. I did not know that this applied to me because I was not open for business.

I am enclosing my filing fee for the years 2000 and 2001. I am requesting that you please wave the reinstatement fee. My lack of knowledge of the State of Florida requirements is what led me to fail to execute my responsibilities with the State.

Please contact me if you have any questions at:

(954) 252-2594 ог

ACENTERPRISES001@CS.COM

Anthony Carter

Sincerely.

President, A.C. Enterprises of Broward County, Inc.