

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 JUL 18 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S59597

1. Corporation Name

S & S Refrigeration, Inc.

400006629874--2
-07/25/02--01002--027
****908.75 ****908.75

REINSTATEMENT 01-02

2. Principal Office Address

3126 Leon Road

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip
32246

Country
USA

3. Mailing Office Address

P.O. Box 8555

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip
32239

Country
USA

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

19 June 1991

5. FEI Number

59-3070991

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

Larry Sanchez

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

2929 Townsend Blvd

Suite, Apt. #, Etc.

City

Jacksonville, FL

State
FL

Zip Code
32277

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

Larry Sanchez

REGISTERED AGENT MUST SIGN

Date *16 July 2002*

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
PC	Larry Sanchez	2929 Townsend Blvd	Jacksonville, FL 32277
T	Larry Sanchez, Jr	899 Duskin Dr.	Jacksonville, FL 32216

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:

Larry Sanchez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16 July 2002

Date

904-641-0400

Daytime Phone #

CR2E001 (8/01)

7/18/02