

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

02 AUG -5 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #S88037

1. Corporation Name

STAR POOL BUILDERS, INC.

Principal Place of Business

Mailing Address

8420 S.W. 116th Street
Miami, Fla. 33156

8420 S.W. 116th Street
Miami, Fla. 33156

200006972092--6
-08/08/02--01021--026
****750.00 ****750.00

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/17/91

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number
65-0328717

Applied For
Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D/P/S/T	CASIMIRO EGUIZABAL	8420 S.W. 116th Street	Miami, FL 33156

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MARLENE EGUIZABAL
8420 S.W. 116th Street
MIAMI, FL. 33156

Name

CASIMIRO EGUIZABAL

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

8420 S.W. 116th Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33156

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

Date

REGISTERED AGENT MUST SIGN

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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

7/15/02 (786) 486-7665
Date Daytime Phone #

CR2E081 (12/98)

July 15, 2002

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

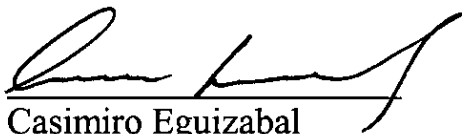
RE: **Star Pool Builders, Inc.**
8420 SW 116 Street
Miami, Florida 33156
FEI # 65-0328717
Document # S88037

With these letter we are requesting reinstatement for the above mention corporation. A check for \$750.00 is included.

Also, we respectfully request the late fees to be waived since we never received forms for the Annual Report to be filed

If you have any question you can call me at (786) 486-7665.

Thank you,



Casimiro Eguizabal
President