

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

80192

~~CORPORATION~~
~~REINSTATEMENT~~



FLORIDA DEPARTMENT OF STATE
Katherine M. Harrell
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 MAY 16 PM 12:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V13049

1. Corporation Name

P.B. INVESTORS, INC

2. Principal Office Address

1890 OCEAN DRIVE SOUTH

Suite, Apt. #, etc.

EAST BUILDING #406

City & State

HALLANDALE, FLORIDA

Zip

33009

Country

U.S.A

3. Mailing Office Address

3328 AVENUE TROIE

Suite, Apt. #, etc.

APT 319

City & State

MONTREAL, P.Q.

Zip

H3V-1B1

Country

CANADA

4. Date Incorporated or Qualified
To Do Business in Florida

2/10/1992

5. FEI Number

65-0316568

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

BOH BOT PERLA

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

1890 OCEAN DRIVE SOUTH

Suite, Apt. #, Etc.

EAST BUILDING #406

City

HALLANDALE

State

FL

Zip Code

33009

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

[Signature]

Date 10 APRIL 2001

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
P	BOH BOT PERLA	1890 OCEAN DRIVE SOUTH #406	HALLANDALE, FL. 33009

SP

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10 APRIL 2001

Date

(954) 457-4255

Daytime Phone #

CR2E081 (9/00)

Pg 2062

TO: FLORIDA DEPARTMENT OF STATE.

April 10th 2001.

RE: P.B INVESTORS INC

File: V13049

Please find enclosed the reinstatement form duly completed with fees of 300⁰⁰ for annual report fees for years 2000 & 2001. We are kindly ask you to waive the reinstatement fees for the following reasons:

- 1) The company P.B investors inc was incorporated since 1992. Since the incorporation of the company we have always on due time fill in the annual report every years.
- 2) Around mi-january 2001, we were surprised not to have received the annual report form for the years 2001, so we have call your services to ask them to send us the form for year 2001. We were then inform that the company has been dissolved because of not sending the annual report for years 2000.
- 3) We have send the annual report for years 2000 on due time like each year, so we didn't understand why you did not received it like each year.
- 4) Before dissolved a company we should have received a warning to produce the annual report, (which we did)
- 5) When we produced an annual report each year, we never received a acknowledgement of it, so we never knew that in fact you didn't received the one for 2000, until we call for the form 2001.

Thank - you in advance for your understanding.