

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham,  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 FEB 23 PM 12:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N18225

1. Corporation Name

THE MARTIN BUILDING, INC.

(W98-3290)

Principal Place of Business

Mailing Address

1580 40th Terrace S.W.  
Naples, Florida 34116

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

REINSTATEMENT 95-97

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

December 11, 1986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEJ Number

59-2778860

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
S/T/D	Luigi Assanti	1580 40th Terrace S.W.	Naples, Florida 34116
P/D	Nelver Leon	1580 40th Terrace S.W.	Naples, Florida 34116
D	Gary F. Dargai	1580 40th Terrace S.W.	Naples, Florida 34116

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name		Nelver Leon	
Street Address (P.O. Box Number is Not Acceptable)		1580 40th Terrace S.W.	
Suite, Apt. #, Etc.		200002448682--3	
		--03/05/98--0112--012	
City		Naples	
State		FL	
Zip		34116	

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

2/6/98

11. This corporation owes or has paid 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]*

Luigi Assanti

2/6/98

(941)353-1040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (1/98)