

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

10f2

FILED

03 OCT 21 PM 3:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000012163

1. Corporation Name

REEL WINDOWS, INC.

2. Principal Office Address

12875 SW 72 TERRACE

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33183

Country

USA

3. Mailing Office Address

1440 JFK Causeway

Suite, Apt. #, etc.

301

City & State

North Bay Village, FL

Zip

33141

Country

USA

900023965639

10/21/03-01040-020 **150.00

REINSTATEMENT

4. Date Incorporated or Qualified

To Do Business in Florida

02/03/2000

5. FEI Number

65-0978962

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

LILIAM FERNANDEZ

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

1440 JFK Causeway

Suite, Apt. #, Etc.

301

City

North Bay Village

State

FL

Zip Code

33141

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

REGISTERED AGENT MUST SIGN

Date

10/16/2003

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
PD	Blanco, Nelson D.	12875 SW 72 Terr.	Miami, FL 33183

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:

Nelson Blanco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/16/03

Date

Daytime Phone #

CR2E081 (10/02)

B

LILIAM FERNANDEZ P.A.
CERTIFIED PUBLIC ACCOUNTANT

Member of the American Institute of Certified Public Accountants (AICPA), and the Florida Institute of Certified Public Accountants (FICPA).

October 16, 2003

Division of Corporations
Annual Report/Reinstatement Section
P O Box 6327
Tallahassee, FL 32314-6327

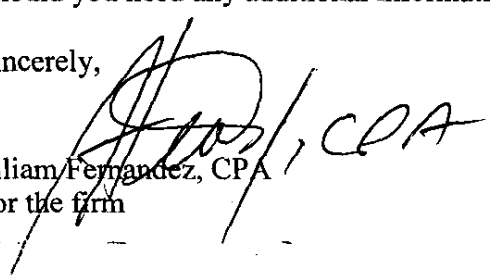
RE: Reel Windows, Inc.
Annual Report

Dear Ladies and Gentlemen:

Enclosed is the completed reinstatement form with a check for \$150.00. My above referenced client never received the actual form; therefore we have downloaded a form from the web and completed it.

Should you need any additional information, please do not hesitate to contact me.

Sincerely,


Liliam Fernandez, CPA
For the firm

Cc: Nelson D. Blanco