

## 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUI 1. Entity Nami NELSON				FILED 07 MAR -8 PH 12: 00						)n						
Principal Place 5205 DURAN DOVER, FL 3	T RD	Mailing Ad 5205 DUI DOVER, F				W.	)	SECR	ETARY	r GF	STAIR	<del>-</del>				
2 Principal P	Address Hv	tys burg Rd														
Suite, Apt.	7677 ; #, etc.	Suite, Apt. #, etc.				•	医结形	VIST			316	Tu Ol	0-07			
Boca State	Rato	NIFI	Boca RATON, FI					4. FEI Number Applied For 56-2452619 Not Applicable								
33434 PAIN BEACH				3343	14	4In B	each	5. Certific	ate of St	atus Desire	d <b>P</b>		8.75 Add ee Required			
NELSON, I 5205 DURA DOVER, FI		7. Name and Address of New Registered Agent  Name Nelson, ENTIC i.  Street Address (P.O. Box Number is Not Acceptable)														
8. The above	named entit	v submits this	statement for	the ourpose o	of changing its	s registere	7-		RAHON ed agent, or		the State of		FL am far	習着学		
	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and life of applicable. (NDTE: Registered Agent signature required when reinstating)  DATE															
FIL	E NOW!!	! FEE IS S	6300.00								accordance rporation of					
10.		OF	FICERS AND D		_	11.		I	ADDITIO	NS/CHA	NGES TO C	OFFICERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P NELSON, ENRIE L -5205-DURANT-RB -DOVER; FL-33527						ME METADDRESS POET ADDRESS POET ADDRESS POET RATION OF 33434						Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Delete									Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-		☐ Defete				•				[	Change	■ Addition	
TITLE NAMÉ STREET ADDRESS CITY-ST-ZIP								200093 03/19/070105				3 <b>74</b> )590	□ Change □ Addition <b>7477</b> 62 9-019 **308.75			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Delete								ŧ	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					□ Delete								[	Change	Addition	
indicated of the cor	on this repo poration or t	rt or supplem he receiver o	supplied with the nental report is to trustee empower an address, we	true and accu wered to exec	urate and that oute this repor	my signal t as requi	ture shall h	ave the	same legal e	effect as atutes; ar	if made und id that my n	ler oath; th ame appe	at Lam	an officer	or director	
SIGNAT	URE: _	EMU SIGNATURE	AND TYPED OR PR	INTED NAME OF	SIGNING OFFICER	R OR DIRECT	TOR				3/4/C	07	Dayt	ime Phone #		

2880

To whom it may cozera,

2Ne did not receive notice to pay and
did not realize payment was due We had
moved, nothing wer cought up with us.

2Ne were notified by one of the companies
we pabaration with that we need incorporation
papers, and proof we paid yearly. Which
we didn't realize we had to do wery year
price we had not received notice. Excoced
is the \$150.00 payment. Please wowe the
late fee. New hadress 9135 Hettyphing Rd
Bora Roton, Fl

Thank your.

E. Lee Nelson
Nelson Dock + Door Inc
Pa4000047434