

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JUN -4 PM 5:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000077877

1. Corporation Name  
ACCU-RITE SERVICES, INC.

5071 ROSEN BOULEVARD  
5071 ROSEN BOULEVARD

2. Principal Office Address  
5071 ROSEN BOULEVARD

3. Mailing Office Address  
5071 ROSEN BOULEVARD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
BOYNTON BEACH, FL

City & State  
BOYNTON BEACH, FL

Zip Country  
33437-1273 USA

Zip Country  
33437-1273 USA

300037665589  
06/04/04--01033--013 \*\*300.00

REINSTATEMENT 03.04

4. Date Incorporated or Qualified  
To Do Business in Florida 09/18/1996

5. FEI Number Applied For  
65-0702891 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  
COSTANTINO, UGO M.

Street Address (P.O. Box Number is Not Acceptable)  
5071 ROSEN BOULEVARD

Suite, Apt. #, Etc.

City  
BOYNTON BEACH

State Zip Code  
FL 33437-1273

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

*Ugo M. Costantino*  
REGISTERED AGENT MUST SIGN

Date 05/28/2004

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
DPST	COSTANTINO, UGO M.	5071 ROSEN BOULEVARD	BOYNTON BEACH, FL 33437-1273
VP	ESSICK, CHRISTOPHER R.	5071 ROSEN BOULEVARD	BOYNTON BEACH, FL 33437-1273

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:

*Ugo M. Costantino*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/28/2004

Date

561-731-1864

Daytime Phone #

CR2E081 (01/04)

**Accu-Rite Services, Inc.**  
5071 Rosen Boulevard  
Boynton Beach, Florida 33437-1273  
Phone (561) 731-1864 ■ Fax (561) 731-3459

May 28, 2004

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

Re: Document #P96000077877

Dear Sir/Madame:

Please be advised that I am submitting an application for reinstatement of my corporation and I am enclosing a check for \$300.00 for both annual reports in arrears for years 2003 and 2004.

At this time, I request that the reinstatement fees for both years 2003 and 2004 be waived because I did not receive the forms for either year in the mail. I called the reinstatement area and was advised that the Division no longer sends out the forms. I had no idea that the Division had stopped this practice and that the responsibility of filing annually now falls on my corporation to remember to file. If you have a recall system that can email me a reminder, **please** forward an email to me at [umcinfl@bellsouth.net](mailto:umcinfl@bellsouth.net).

Your consideration of my request for waiver of fees would be greatly appreciated and is courteously requested.

Sincerely,



Ugo M. Costantino  
President/Director