

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1-2

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 26 PM 5:37

DOCUMENT # P99000051433

1. Corporation Name

QUICKEST PRINTING CORP.

Principal Place of Business

Mailing Address

606 WATERWAY VILLAGE CT.
GREENACRES FL 33413

606 WATERWAY VILLAGE CT.
GREENACRES FL 33413

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

06/03/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0932612

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6.

CERTIFICATE OF STATUS DESIRED

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	4 City / State / Zip
P	Maria Armijos	606 waterway village ct. West Palm Beach, FL 33413	West Palm Beach, FL 33413

300003465153--E

-11/15/00--01114--017

****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DEL PILAR ARMIJOS, MARIA
606 WATERWAY VILLAGE CT.
GREENACRES FL 33413

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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 REQUIRED
REGISTERED AGENT MUST SIGN

Date

10/23/00

11. 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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

AD

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/23/00 (S61) 352-705

Quickest PRINTING

606 Waterway Village Ct.
West Palm Beach, FL 33413
561-352-7051 Fax: 561-642-2941

Date:10-23-00

FLORIDA DEPARTMENT OF STATE
Corporation Reinstatement Division
PO Box 6327
Tallahassee, FL 32314

To whom it may concern:

On the third week of October of the year 2000, I have received a notice of dissolution of the corporation that I represent (Quickest Printing, Corp.). By reading this notice and by talking over the phone to Mrs. Michelle, (one of your representatives from your office) I understand that previous to this notice a first notice was sent to my attention, I can assure you that I never received any of these information and I should also tell you that since this is the first time that I register a corporation I never expected this mentioned requirement, other than the sales taxes that I collect for the state for every quarter. Based on these facts I asked you to please reconsider this decision and kindly accept this regular fee of \$150.00 to normalize the status of Quickest Printing, Corp. so that we can continue trying to stabilize this business that presently is struggling to survive.

Thank-You

Maria Armijos
President