

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



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

APPROVED AND FILED pg. 1 of 2

97 OCT 29 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000043551

1. Corporation Name

NAIL EXPRESS, INC.

97-AR

Principal Place of Business

9285 SEMINOLE BLVD.
SEMINOLE FL 34642

Mailing Address

9285 SEMINOLE BLVD.
SEMINOLE FL 34642



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business In Florida

5. FEI Number

59-3432094

Applied For

Not Applicable

6. 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
P	LYNDA BROGLE	12078 MURRAY AVE N	LARGO, FL 33778
VP	JOHN M. BROGLE	12078 MURRAY AVE N	LARGO, FL 33778

300002343663-4
-11/10/97-01177-002
***165.00 ***165.00

8. Name and Address of Current Registered Agent

BROGLE, LYNDA

12078 MURRAY AVE N
LARGO, FL 33778

9. Name and Address of New Registered Agent

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

Synda Brogle
REGISTERED AGENT MUST SIGN

Date 10-24-97

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:

Synda Brogle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/24/97 813-586-1223
Date Daytime Phone #

CR2040 (8/97)

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Nail Express, Inc.
9285 Seminole Blvd.
Seminole, FL 34642

Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

October 23, 1997

Dear Sirs:

I purchased this business on February 19, 1997 from Lori Dzierzyk, the owner of the business. We used an attorney that Lori knew and I believe that was my first mistake. I applied for a new FEI Number and opened a new bank checking account. The attorney did not dissolve Lori's existing S Corporation but explained to me that that everything was being taken care of properly and all of the papers were filed correctly. I was led to believe that the 1997 Annual Report was being taken care of by the attorney and Lori, which apparently was not the case.

I am submitting the Annual Report with a check in the amount of \$165.00 in the hopes that you will abate the penalty and reinstate the corporation. I understand that this penalty can never be waived again but I can assure you that this problem will never happen again. Thank you for your attention to this matter.

Sincerely,

Lynda Brogle

Lynda Brogle