1082

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 JAN -6 P 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # ~~CP 575 G~~ P99000108049

1. Corporation Name
RIGS & THINGS PARASERVICE
515 NE 21st. Place
Cape Coral FL 33909

REINSTATEMENT 03-06
CR2E081 (12/05)

WOP

2. Principal Office Address	3. Mailing Office Address
515 NE 21ST. PLACE	P.O. BOX 987
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CAPE CORAL	City & State: LA BELLE
Zip: 33909 Country: USA	Zip: 33975 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 1/14 2000

5. FEI Number: 65-0971771 ☐ 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: ROY TORGERSON
Street Address (P.O. Box Number is Not Acceptable): 515 NE 21 ST. PLACE
Suite, Apt. #, Etc.:
City: CAPE CORAL State: FL Zip Code: 33909

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: _____ Date: 1/03/06
REGISTERED AGENT MUST SIGN

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
P	ROY TORGERSON	515 NE 21 ST. PL CAPE CORAL, FL. 33909	

100063002831
01/06/06--01054--007 **600.00

10. I certify that I am an officer or director of 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 contained in Chapter 119, 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: _____ 1/03/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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RIGS & THINGS Paraservice

Florida Department of State
Secretary of State
Divisions of Corporations

RE: Non-receipt

January 3rd, 2006

To Whom it May Concern:

Please be advised that we never received the annual report notices in the year of dissolution. It was by calling my accountant this morning to ask when we normally get the receipt that he found out about it. He told me that the State now send out a postcard with information to file on-line, in lieu of the more obvious official letter we have received in the past. He said that several of his clients mistakenly discarded these cards as advertised mail.

To the best of my knowledge, I have never received such a postcard.

Please find enclose check number 3633 in the amount of $600.00 for the years 2003, 2004, 2005 and 2006, for reinstatement.

Sincerely,

Roy Torgeirson

RIGS & THINGS PARASERVICE, INC.
515 N.E. 21ST. PLACE
CAPE CORAL, FL 33909

PHONE: 863-675-4628 FAX: 863-675-4595 E-MAIL: INFO@PARA-SERVICE.COM