

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 MAR 14 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

02-03



500012570345
02/14/03--01061--008 **750.00

DOCUMENT # 335007

1. Corporation Name

DECORATING, INC.

Principal Place of Business

1345 SOUTH MADISON AVENUE
CLEARWATER FL 33756
US

Mailing Address

1345 SOUTH MADISON AVENUE
CLEARWATER FL 33756
US

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

2. New Principal Office Address, If Applicable
1329 S. Madison Avenue

Suite, Apt. #, etc.

City & State
Clearwater, FL 33756

Zip
33756

Country
USA

3. New Mailing Office Address, If Applicable
1329 S. Madison Avenue

Suite, Apt. #, etc.

City & State
Clearwater, FL 33756

Zip
33756

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/13/1968

5. FEI Number

59-1226339

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSD	MITCHELL, CLINTON B	1345 SOUTH MADISON AVE	CLEARWATER FL Delete
VPD PSD	MITCHELL, RICHARD E.	1329 S. MADISON AVENUE	CLEARWATER FL

500012570345
03/14/03--01101--005 **150.00

8. Name and Address of Current Registered Agent

MITCHELL, CLINTON B
1345 S MADISON AVE
CLEARWATER FL 34616

9. Name and Address of New Registered Agent

Name

Richard E. Mitchell

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

1329 S. Madison Avenue

Suite, Apt. #, Etc.

City

Clearwater

State

FL

Zip Code

33756

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. or 617.0505, F.S.

Signature of
Registered Agent

Richard E. Mitchell
REGISTERED AGENT MUST SIGN

Date

2-6-03

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

SIGNATURE:

Richard E. Mitchell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-6-03

Daytime Phone #

CR2E040 (8/02)