

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2006 JUN 15 PM 2:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 407756

1. Corporation Name

Masonex International, Inc.

2. Principal Office Address

2720 Forest Hill Boulevard

Suite, Apt. #, etc.

3. Mailing Office Address

2720 Forest Hill Boulevard

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

City & State

West Palm Beach, FL

Zip

33406-5914

Country

USA

Zip

33406-5914

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/29/1972

5. FCI Number

591415885

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name
William S. Ball

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

2720 Forest Hill Boulevard

Suite, Apt. #, Etc.

City

West Palm Beach

State

FL

Zip Code

33406

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

William S. Ball

REGISTERED AGENT MUST SIGN

Date June 8, 2006

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,T,D	William S. Ball	2720 Forest Hill Boulevard	West Palm Beach, FL 33406
V,S,D	Doris Foster Ball	2720 Forest Hill Boulevard	West Palm Beach, FL 33406

REINSTATEMENT

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06/21/06--01017--006 **1200.00

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 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:

William S. Ball

William S. Ball

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 13, 06

Date

261-967-3450

Daytime Phone #