

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR



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

paye 10/2

FILED

02 NOV -6 PM 2:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # F01000000976

1. Corporation Name

ECONOMY MAINTENANCE SUPPLY COMPANY

Principal Place of Business

11 ACACIA LANE
STERLING VA 20166

Mailing Address

11 ACACIA LANE
STERLING VA 20166

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

02/19/2001

5. FEI Number

52-1395015

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	4 City / State / Zip
PD	DECANIO, JOHN	11 ACACIA LANE	STERLING VA
VD	WARREN, WILLIAM	11 ACACIA LANE	STERLING VA
			200008840702 11/06/02--01142--017 **150.00

02 41312

8. Name and Address of Current Registered Agent

DECANIO, PATRICK
9717 VIA SEGOVIA
NEWPORT RICHEY FL 34655

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Patrick Decanio
SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/31/02

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:

Patrick Decanio
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/02

Date

Daytime Phone #

CR2040 (8/02)



Mailing Address
PO Box 1070
Ashburn, VA 20146
Phone (703) 404-7700
Toll Free 800-999-4948

Physical Address
11 Acacia Lane
Sterling VA 20166
Fax (703) 404-7722
www.ems-corp.com

paycrw

Providing Maintenance Solutions For Over 16 Years

November 4, 2002

Department of State
Division of Corporations
P.O. box 6327
Tallahassee, FL 32314

RE: Economy Maintenance Supply Company
FEI number: 52-1395015

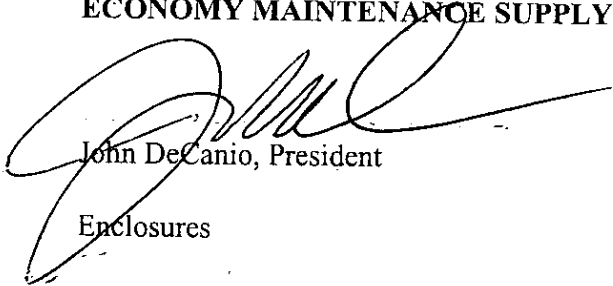
I request that the reinstatement fee be waived for Economy Maintenance Supply Company for the 2002 Uniform Business Report (UBR). We did not receive the initial UBR notice.

Enclosed is our completed application for reinstatement and our check in the amount of \$150.00 for the UBR filing fee.

Thank you for your consideration. If you have any questions, please do not hesitate to call me at (703) 404-7700.

Sincerely,

ECONOMY MAINTENANCE SUPPLY COMPANY


John DeCanio, President

Enclosures