

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 OCT 27 PM 2:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **FD2000000016**

1. Corporation Name

VINTAGE CONTRACTING OF N.J., INC.

2. Principal Office Address

811 16TH AVENUE

Suite, Apt. #, etc.

City & State

BELMAR, NJ

Zip

07719

Country

USA

3. Mailing Office Address

811 16TH AVENUE

Suite, Apt. #, etc.

City & State

BELMAR, NJ

Zip

07719

Country

USA

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

22-2921408

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

JAY REAGAN, JR.

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

208 LAKE PARSON GREEN

Suite, Apt. #, Etc.

APT. 1310

City

BRANDON

State

FL

Zip Code

33511

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

REGISTERED AGENT MUST SIGN

Date

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
PCD	ANTHONY GAROFALO	811 16TH AVENUE	BELMAR, NJ 07719
YD	KEEFE PIROG	811 16TH AVENUE	BELMAR, NJ 07719

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E031 (10/02)

9/10/20

October 16, 2003

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: VINTAGE CONTRACTING OF N.J., INC.
FID #22-2921408

Gentlemen:

After corresponding with your office, enclosed please find the corporate reinstatement for Vintage Contracting of N.J., Inc. We have also enclosed a check in the amount of \$150 as the annual report fee for 2003.

Please be advised that this office did not receive the original uniform business report which we were advised was mailed from your office in February 2003.

Please consider our request and abate the balance of the reinstatement fee of \$750 as it has always been our intention to file all taxes and returns timely.

Please contact me at your earliest convenience.

Very truly yours,



Anthony Garofalo
President