

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2007 DEC 12 AM 11:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F03000004447

1. Corporation Name

HERMES ARCHITECTS, INC.

W07-58338

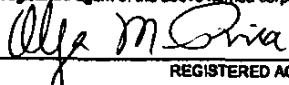
2. Principal Office Address - No P.O. Box # 7915 Westglen		3. Mailing Office Address Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Houston, TX		City & State	
Zip 77063	Country USA	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 9/4/2003
5. FEI Number 74-1811157
6. CERTIFICATE OF STATUS DESIRED ☒ 7. Additional Fee required for a Certificate of Status

REINSTATEMENT D6-07
CR2E081 (1/07)

7. Name and Address of Current Registered Agent			
Name Fowler White Boggs Banker P.A.			
Street Address (P.O. Box Number is Not Acceptable) 501 E. KENNEDY BLVD.			
Suite, Apt. #, Etc. STE. 1700			
City Tampa	State FL	Zip Code 33601	

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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 	Olga M. Pina Date 11/27/2007

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
DP	Charles R. Bellomy	7915 Westglen Drive	Houston, TX 77063
V	Ralph R. Windle	7915 Westglen Drive	Houston, TX 77063
DS	Marc Boucher	7915 Westglen Drive	Houston, TX 77063
BVP	Mark Volpendesta	7915 Westglen Drive	Houston, TX 77063

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: 	RALPH R. WINDLE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	11/27/07 Date	713-785-3644 Daytime Phone #
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