PLEASE READ	ALL INSTRUCTIONS BEFORE (COMPLETING THIS FORM.
APPLICATION	FLORIDA DEPARTMENT OF STATE	:
FOR	Katherine Harris	
	Secretary of State	
REINSTATEMENT	DIVISION OF CORPORATIONS	1
DOCUMENT # F90853		0.0 10.0 0.0 0.0 0.0
1. Corporation Name SOUTHWEST FRAME	& EQUIPMENT, INC.	\$37.77.00
DOOTHWEDT THUS	a Egoriment, Inc.	
December Disease Disease Property of Disease P	The four Address	William and Andreas
Principal Place of Business	Mailing Address	
2070 Arbour Walk Circle	2070 Arbour Walk Circle	•
Naples, FL 33942	Suite 3213	
, , , , , , , , , , , , , , , , , , ,	Maples, FB 33342	
If above addresses are incorrect in any way, line th	rough incorrect information and enter correction below	
2. New Principal Office Address. If Applicable	3 New Mailing Office Address, If Applicable	Date Incorporated or Qualified
13403 Fox Chapel Court Suite, Apt. #, etc.	c/o Robert A. Winesett, Esq. Suite, Apt #, etc	* To Do Business in Florida 07/15/1982
	P.O. Drawer 610	5 FE1 Number Applied For
Fort Myers, FL 33919	Fort Myers, FL 33902-0610	59-2211896 Not Applicable
Zip Country 33919 Lee	Zin Country 1.ee	6 CERTIFICATE OF STATUS DESIRED \$\frac{\xi}{2}\$ \$8.75 Additional Fee required for a Certificate of Status
7. Names and Street Addresses of Each Officer and	il to a <u>unit</u> For Director (Florida rionprofit corporations must list at le	est 3 directors)
Name of Officers Title(s) and/or Directors	Street Address of Each Officer and or Directo	Dr. City / State / Zin
)/P/S/T SCHAPPERT, KEVIN	3 (Do NOT Use Post Office Box 13404 Fox Chappel Cot	· · · · · · · · · · · · · · · · · · ·
		1 CICHCID 28714219 -05/11/9901061014
		***1200 75 ***1208.75"
n i i i i i i i i i i i i i i i i i i i	istatement 96-	.99 \$ 5/5/99
		A Norman and Add to see Add to Don't and Add to the
8. Name and Address of Current	_	Name and Address of New Registered Agent Winesett
		P.O. Box Number is Not Acceptable) st Street -
_	Como. Apr. 1. 1.	
and the second	City Fort 1	Myers State Zip 33901
10. I, being appointed the registered acept of the ab	ve names forporation, and familiar with and accept the c	obligations of Section 607,0505, F.S
Signature of Registered Agent B	EGISTERED AGENT MUST SIGN	Date Up in 127, 1999
11. This corporation owes the	current year	
Intangible Personal Prope		No (See other side for information on intangible tax.)
this reinstatement application, the reason for diss owed by the corporation have been paid and the	olution has been eliminated, the corporate name satisfies	provided for in chapter 607 or 617, F.S. I further certify that when filing is the requirements of section 607,0401 or 617,0401, F.S., that all fees an exemption under section 119,07(3)(i), F.S. The information indicated or oath.
4		

April 27, 1999 (941)495-8900

SIGNATURE: 160 July SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR Kevin Schappert, President