

2004 FOR PROFIT CORPORATION REINSTATEMENT

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DOCUMENT # H57491	
1. Entity Name U-FRAME-IT OF FORT WALTON BEACH, INC.	



FILED
04 NOV 19 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 421 NE RACETRASH FORT WALTON BEACH, FL 32548	Mailing Address 1909 MARWALT 1024 FORT WALTON BEACH, FL 32548
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2. Principal Place of Business 421B Racetrack Rd NE	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country



4. FEI Number 59-2537118	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SIMPSON, DAVID A 909 MARWALT DR #1024 FORT WALTON BEACH, FL 32548	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE	DATE 11/15/04

FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALAGARIE, SARAH R. 109 LAKE LORRIANE CIRCLE SHALIMAR, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS JONKE, SUE ANN 231 COUNTRY CLUB RD SHALIMAR, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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11/19/04--01049--018 **150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE:	DATE 11/15/04

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November 15, 2004

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Reference: U Frame It of FWB, Inc.
Document #H57491

To Whom It May Concern,

Please be advised, we did not receive any card or Annual Report from the Division of Corporations for 2004. This is the first year that we did not receive any information from you. I have downloaded the form from the web site and am sending it at this time. I understand there is no penalty for this delay, as no information was received. The normal Annual Report fee is \$150.00 annually, which will be enclosed. Please reinstate this Corporation ASAP.

Will we receive any card or report next year to let us know when this Annual Report and fee is due?

Sincerely,



Sue Ann Jonke
231 Country Club Road
Shalimar, FL 32579
850-651-3904/543-9980
sajonke@cox.net