

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 AUG 23 PM 4:01

CORPORATION  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # K90497

1. Corporation Name

HAWKEYE ROOFING INC.

2. Principal Office Address

343 Sharwood Drive

Suite, Apt. #, etc.

Naples, FL

City &amp; State

34110

Zip

Country

USA

3. Mailing Office Address

P.O. Box 110008

Suite, Apt. #, etc.

Naples, FL

City &amp; State

34108

Zip

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5/24/89

5. FEI Number

65-0123187

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐See the instructions for completing  
the Certificate of Status

7. Name and Address of Current Registered Agent

Name

Johnson, Henry P., Esq. Law Offices of Henry Paul Johnson

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

5640 Willow Park Drive

Suite, Apt. #, Etc.

City

Naples, FL

State  
FL

Zip Code

34108

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of sections 607.0605 or 617.0603, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

8/21/02  
8/21/02

9. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Lee Jenness	P.O. Box 110008	Naples, FL 34108
VP	Edmundo Reyes	P.O. Box 110008	Naples, FL 34108
VP	Mario Hinojoso	P.O. Box 110008	Naples, FL 34108
Sec	Cynthia Jenness	P.O. Box 110008	Naples, FL 34108

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 taxes owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 118.07(2)(b), 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

8/21/02

Date

597-9262

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Hawkeye Roofing, Inc.  
343 Sharwood Drive  
P.O. Box 110008  
Naples, Florida 34108  
(239) 597-9252

August 21, 2002

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

To whom it may concern:

We never received any corporate packets for the filing of our corporation for the calendar years 2001 and 2002. Apparently, they were sent to Post Office Box, 420033, Naples, Florida 34110. That is not our Post Office Box. These items were never forwarded to us from our old Post Office Box to our present Post Office Box which is as follows:

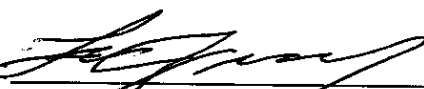
P.O. Box 110008  
Naples, Florida 34108

As a consequence of same, enclosed you will please find herein a check in the amount of \$300.00 which represents the annual filing fees for the calendar years 2001 and 2002 for our corporation, along with Corporation Reinstatement document. It is respectfully requested that you immediately reinstate our corporation so that we can engage actively in business. We would appreciate immediate confirmation of this fact.

Respectfully yours,

Hawkeye Roofing, Inc.

By

  
Leroy Jenness, Authorized Agent