

12/1/02

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 OCT -1 PM 2:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L40970

1. Corporation Name
R+K Custom Pools, Inc.

2. Principal Office Address
PO Box 41217
7806 Ashford Ct. N.
Suite, Apt. #, etc.

3. Mailing Office Address
Same
Suite, Apt. #, etc.

REINSTATEMENT 03-04
JK

City & State
St. Petersburg, FL
Zip
FL 33709 Country
Pineellas

City & State
St. Petersburg, FL
Zip
33743 Country
Pineellas

4. Date Incorporated or Qualified
To Do Business in Florida
5. FEI Number
59-2981716 Applied For
Not Applicable
6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

33743
7. Name and Address of Current Registered Agent
Name
Scott F. Newson, CPA
Street Address (P.O. Box Number is Not Acceptable)
200 S. Hoover Blvd
Suite, Apt. #, Etc.
201-140
City
Tampa State
FL Zip Code
33609.

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 _____ Date _____
REGISTERED AGENT MUST SIGN

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
<u>P</u>	<u>RUSSELL BERGHOEFFER</u>	<u>7806 Ashford Ct. N.</u>	<u>St. Petersburg, FL 33709</u>
			<u>10/08/04--01020--021 **150.00</u>
			<u>400040538454</u>
			<u>08/26/04--01051--008 **600.00</u>

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
8-23-04
Date
727-844-3510
Daytime Phone #

CR2E081 (10/02)

FEIN-59-2981716
R 2002

RUSSELL BERGHOEFER, President
R&K Custom Pools, Inc.
P.O. Box 41217
St Petersburg, FL 33743

August 23, 2004

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

RE: Request for Reinstatement of Corporation

This letter is written to request the reinstatement of R & K Custom Pools, Inc. I request that the Department of State consider reinstating R & K Custpm Pools, Inc. and waiving the reinstatement fee based on the following:

- I previously have never received any notices to file.
- My wife has always handled the corporate paperwork. I am now divorced and am finding that much of the paperwork was not completed in a timely manner, or not at all.

I pray that the state will allow me to continue as R & K Custom Pools, Inc. due to the fact that my failure to file a report was not intentional. I have been in business as R & K Custom Pools, Inc. since 1988 and certainly would like the professional courtesy to remain as such!

Thanking you in advance, I have enclosed a check for \$600.00 to pay my annual fees.

Sincerely,



Russell Berghoefer