

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 NOV 18 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000030834

1. Corporation Name

W. J. M. Builders Inc.

REINSTATEMENT

02-05

2. Principal Office Address

8 Coventry Way

3. Mailing Office Address

8 Coventry Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Williston Manors, FL.

City & State

Williston Manors FL

Zip

Country

33305

U.S.A

Zip

Country

33305

USA

T. Roberts NOV 22 2005
CR2ED811 (8/05)

4. Date incorporated or obtained
To Do Business in Florida

March 27, 2000

5. FEI Number

65-0997327

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

William J. Meisel

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

8 Coventry Way

Suite, Apt. #, Etc.

City

Williston Manors

State

FL

Zip Code

33305

200061552512

11/18/05--01052--014 **1200.00

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

William J. Meisel
REGISTERED AGENT MUST SIGN

Date

Nov 16 2005

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
Pres.	<u>William J Meisel</u>	<u>8 Coventry Way</u>	<u>Williston Manors, FL 33305</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)(f), 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:

William J Meisel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/16/05

Date

954-444-3805

Daytime Phone #