

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED

10f2

02 MAY 16 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **700000053507**

1. Corporation Name

D.O. Drywall of Tampa Inc.

2. Principal Office Address

803 Bellcrest Ct.

Suite, Apt. #, etc.

City & State

TAMPA FL.

Zip

33634

Country

Hillsborough

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

**4. Date Incorporated or Qualified
To Do Business in Florida**

JUN. 2-00

5. FEI Number

59-3653669

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

Dwain Ogilvie

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

1845 Tinker Dr.

Suite, Apt. #, Etc.

City

Lutz

State

FL

Zip Code

33559

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

Dwain Ogilvie

REGISTERED AGENT MUST SIGN

Date **5-16-02**

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 |
|--------|--------------------------------------|---|--------------------|
| Pre | Dwain Ogilvie | 1845 Tinker Lutz Pl | 33559 |
| | | | |
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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:

Dwain Ogilvie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5-16-02 (813) 478-4337

Daytime Phone #

CR2E081 (9/01)

To: Whom it may concern.

This letter is to state that
D.O. Drywall of Tampa Inc.
did not receive its Annual

Report, For 2001.

Dwain A. Osilure 5-16-02
Dwain A. Osilure
President