

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P00000055223**

1. Corporation Name

Depecks Enterprises, Inc.

2. Principal Office Address

5550 S. 37th Court

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Greenacres FL

City & State

Zip

33463

Country

Palm Beach

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6/7/2000

5. FBI Number

651033917

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

SS 75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

David E Wojciechowski

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

5550 S 37th Court

Suite, Apt. #, Etc.

City

Greenacres

State

FL

Zip Code

33463

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

6/14/05

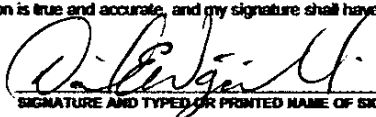
REGISTERED AGENT MUST SIGN

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
PVST	David Wojciechowski	5550 S 37 th Court	Greenacres, FL 33463

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:



David E Wojciechowski

Date

6/14/05 (561-313-9254)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR21001 (01/05)

P.O. Box 5466
Lake Worth, FL
33466[Click here and type return address]

Depecks Enterprises, Inc.

June 14, 2005

To whom it may concern Depecks Enterprises Inc. did not
receive a application for renewal.

I am enclosing a check for \$450.00 for the renewal fee

And \$8.75 for a copy of the Certificate of Status.

In the future please send any correspondence to

Depecks Enterprises, Inc.

5550 S. 37th. Court

Greenacres, FL 33463

Thank you

David E Wojciechowski

President