


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
05 JUL 11 PM 2:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P0000059589

1. Corporation Name  
Dawn & Kevin Soltis, Inc.

WUS 000031024

300056505583  
07/19/05--01042--001 \*\*150.00

300056505583  
06/24/05--01026--006 \*\*900.00

2. Principal Office Address 3739 C.R. 222		3. Mailing Office Address 3739 C.R. 222	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Wildwood, Fl.		City & State Wildwood, Fl.	
Zip 34785-8735	Country Sumter	Zip 34785-8735	Country Sumter

4. Date Incorporated or Qualified To Do Business in Florida 6-14-2000

5. FEI Number 59-3658163 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  
Dawn Soltis

Street Address (P.O. Box Number is Not Acceptable)  
3739 C.R. 222

Suite, Apt. #, Etc.

City  
Wildwood

State  
FL

Zip Code  
34785-8735

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 Dawn M Soltis Date 5-25-05

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
P	Dawn Soltis	3739 C.R. 222	Wildwood, Fl. 34785-8735
V	Kevin Soltis	3739 C.R. 222	Wildwood, Fl. 34785-8735

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: Dawn M Soltis DAWN M. SOLTIS 5-25-05 352-748-7665

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (01/05)