

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1082

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 DEC 28 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000061095

1. Corporation Name
STEVE DAVIS PLUMBING, INC.

2. Principal Office Address

8857 SW 129 Street

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33176

Country

USA

3. Mailing Office Address

8857 SW 129 Street

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33176

Country

USA

200082619332
12/18/06--01058--012 **150.00

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

6/23/2000

5. FEI Number

651030565

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

STEPHEN DAVIS

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

16026 SW 147 Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33196

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

REGISTERED AGENT MUST SIGN

Date 12/13/06

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
PSDV	STEPHEN DAVIS	16026 SW 147 Street	Miami FL 33196

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 contained in Chapter 119, 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

12/13/06 3052530405
Daytime Phone #

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STEVE DAVIS PLUMBING, INC.

8857 SW 129th Street
Miami, FL 33176
Phone (305) 253-0405
Fax (786) 249-0568
steve@drplumbing.fdn.com

December 14, 2006

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

To whom it may concern:

We moved our offices to 8857 SW 129th Street, Miami, FL 33176 in February 2005.

We never received the annual report notices at our new offices and ask that the reinstatement fee be waived. We apologize for any inconvenience.

If there are any questions please call us at (305) 253-0405.

Sincerely,

Stephen Davis

A handwritten signature in black ink, consisting of a stylized 'S' and 'D' followed by a long horizontal stroke.