

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 JAN -2 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000076427

1. Corporation Name

RTP Painting, Inc.

800004785568--1

-01/22/02--01024--009

****750.00 ****750.00

2. Principal Office Address

Angela Cymerman

Suite, Apt. #, etc.

3. Mailing Office Address

333 SW 9th Ave

Suite, Apt. #, etc.

City & State

Baynton Beach, Fl.

City & State

Baynton Beach, Fl.

Zip

33435

Country

USA

Zip

33435

Country

USA

REINSTATEMENT

2001

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

08/08/00

5. FEI Number

65-1035465

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

Angela Cymerman

Street Address (R.D. Box Number is Not Acceptable)

333 SW 9th Ave.

Suite, Apt. #, Etc.

City

Baynton Beach, Fl.

State

FL

Zip Code

33435

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**

Angela Cymerman

REGISTERED AGENT MUST SIGN

Date 12/29/01

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
President	Richard R. Allen	1531 NW 21st Street	Baynton Beach, Fl. 33436
V.P.	Roger W. Allen	5048 Lantana Road #5104	Lake Worth, Fl. 33463
secy/ Treasurer	Angela Cymerman	333 SW 9th Ave	Baynton Beach, Fl. 33435

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:

Angela Cymerman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/29/01 561 734-4552

Date

Daytime Phone #

CR2E081 (9/01)