PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION . REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State division of corporations	FILED 05 DEC -5 PH 9: 36
DOCUMENT # POODOD 78945 1. Corporation Name Hughes wind Shields MFG. Inc.		SENTET ESTATE TAITTE ESTADA
2. Principal Office Address 2.4066 Roger Bodgu M. Bonta Spgt. Fla. 34135 Suite, Apt. #, etc.	Jame Suite, Apt. #, etc.	CR2E081 (8/05) 4. Date Incorporated or Qualified
City & State	City & State	To Do Business in Florida 8/21/2000
Bonita Spjs. Fla. 34135	Zip Country Same	5. FEI Number Applied For 5. 9-3.71.88.5 Not Applicable 6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required
34135 Lee	3 407	for a Certificate of Status
Name Ala T. Freeman Street Address (P.O. Box Number is Not Acceptable) 2325 STAn Ford CT Suite, Apt. #, Etc. City State Zip Code FL 34/12		
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 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
Titles Name of	Street Address of Eag	h Chu/Sata / 7in
D John Hughes	240 b5 Roger Ded	"
		700061911607 12/05/0501052014 **300.00
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: SIGNATURE: SIGNATURE AND TYPED ORPRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Daytime Phone #		

This is a short letter to ask for a warver of penalty for my Corporation, Hughes wind shields MFG as I have received my form because my agent did not pars on my mailing address. Included here is a check for \$300.00 for reinstatoment.

John Hugh Hughed wind shields MFG Thank you.