

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 MAR 18 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

F. H. CANEVARI, INC.

9-82390

REINSTATEMENT 03-04

2. Principal Office Address

308 SE 8th AV

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

OKEECHOBEE, FL. 34974

City & State

Zip

34974

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6-1-00

5. FEI Number

65-1033970

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

FREDERICK H. CANEVARI

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

308 SE 8th AV

Suite, Apt. #, Etc.

City

OKEECHOBEE

State

FL

Zip Code

34974

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

Fredrick H. Canevari

Date 3-15-04

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
OWNER	FREDERICK H. CANEVARI	308 SE 8th AV	OKEECHOBEE, FL. 34974

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:

Fredrick H. Canevari FREDERICK H. CANEVARI

Date

3/15/04 863-610-3735

Daytime Phone #

CR2E081 (07/04)

FREDERICK H. CANEVARI
DBA F. H. CANEVARI, INC
308 SE 8TH AV
OKEECHOBEE, FL. 34974
863-357-0067 OFFICE/FAX
863-610-3735 MOBILE

3/8/04

TO WHOM IT MAY CONCERN,

PLEASE WAIVE THE \$600.00 REINSTATEMENT
FEE. THE PAPERWORK WAS SENT TO AN OLD
ADDRESS. THE ADDRESS ABOVE IS CORRECT.

PLEASE ACCEPT THIS \$300.00 FOR
2003 AND 2004.

THANK YOU.

P-82390

Frederick H. Canevari
FREDERICK H. CANEVARI