


# 2004 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**  
**Oct 28, 2004 8:00 A.M.**  
**Secretary of State**

DOCUMENT # P00000087729					
1. Entity Name CARTINA, INC.					
Principal Place of Business 1210 TANGERINE CT EUSTIS, FL 32726			Mailing Address 1210 TANGERINE CT EUSTIS, FL 32726		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 59-3670682				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent  PAULHAMUS, CAROL 1210 TANGERINE CT EUSTIS, FL 32726			7. Name and Address of New Registered Agent Name <u>Tina Wishneski</u> Street Address (P.O. Box Number is Not Acceptable) <u>1210 Tangerine Ct</u> City <u>Eustis</u> FL Zip Code <u>32726</u>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____</small>					
<b>FILE NOW!!! FEE IS \$750.00</b> <b>After January 1, 2005, Fee will be \$900.00</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAULHAMUS, CAROL 1210 TANGERINE CT EUSTIS, FL 32726	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP, D Tina Wishneski 1210 Tangerine Ct Eustis FL 32726	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Tina Wishneski</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date _____ Daytime Phone # _____					

**CARTINA INC.  
1210 TANGERINE COURT  
EUSTIS, FLORIDA 32726**

October 25, 2004

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

**RE: Corporate Reinstatement Fee**

Dear Sir or Madam:

I respectfully request waiver of the reinstatement fee of \$600 for Cartina Inc. My mother, Carol Paulhamus, was the president and managing officer for the corporation. She became sick late in 2003 and died on June 10, 2004.

I have found many, many things undone and am slowly digging my way out of a very deep mass of paperwork. One of the many items that was not done was the timely filing of the Annual Report.

I am submitting the Annual Report with this letter along with a check for \$150. I am requesting a waiver of any or all of the late fee. Your consideration will be most gratefully appreciated.

Thank you for your prompt response to this letter.

Sincerely,



Tina Wishneski  
Vice President

Enclosures