

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

04 JAN 22 PM 3:40

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # P00000094936

1. Corporation Name

DJ's Moving Service, Inc.

2. Principal Office Address

2805 St Marks Dr.

Suite, Apt. #, etc.

City & State

Titusville, FL

Zip

32780

Country

Brevard

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

Zip

Country

**REINSTATEMENT**

03-04

300027404229

01/22/04--01023--011 \*\*300.00

4. Date Incorporated or Qualified  
To Do Business In Florida

10/11/00

5. FEI Number

59-3678274

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

John Evans P.A.

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

1702 S. Washington Ave.

Suite, Apt. #, Etc.

City

Titusville

State

FL

Zip Code

32780

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 1/12/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip   |
|--------|--------------------------------------|---|----------------------|
| P.T.   | Dawn A. Mangano                      | 2805 St Marks Dr.                                 | Titusville, FL 32780 |
| V.S.   | Joseph P. Mangano                    | 2805 St Marks Dr.                                 | Titusville, FL 32780 |
|        |                                      |   |                      |
|        |                                      |   |                      |
|        |                                      |   |                      |
|        |                                      |   |                      |

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 OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-04

Date

3815367779

Daytime Phone #

CR2001 (10/02)

January 12, 2004

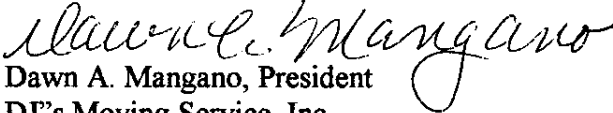
Florida Department of State  
Division of Corporations

Dear Sirs:

This letter is to request a waiver of the reinstatement fees required by DJ's Moving Service, Inc., document number P00000094936.

I request a waiver for two reasons. The first, we've no record of receiving the 2003 report in the mail requesting annual fees. The second, due to the State's licensing requirements, which began in 2002, we've been, for all practical purposes, out of business, and can't afford a \$900.00 fee.

Thank you for your consideration,

  
Dawn A. Mangano, President  
DJ's Moving Service, Inc.