

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

W2500010022

FILED

05 MAR 21 PM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000000596

1. Corporation Name

Permco Painting, Inc.

20588 Charing Cross Circle

20588 Charing Cross Circle

2. Principal Office Address

20588 Charing Cross Circle

3. Mailing Office Address

20588 Charing Cross Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Estero, Florida

City & State

Estero, Florida

Zip

33928

Country

USA

Zip

33928

Country

USA

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

1-02-2001

5. FEI Number
22-3627451

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Douglas B. Smith

Street Address (P.O. Box Number is Not Acceptable)
20588 Charing Cross Circle

Suite, Apt. #, Etc.

City

Estero

State

FL

Zip Code

33928

400049904594

04/05/05--01045--011 **1500.00

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

Douglas B. Smith (pres)

Date **2-18-05**

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
P/V/T/ S/D	Douglas B. Smith	20588 Charing Cross Circle	Estero, FL 33928

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:

Douglas B. Smith (pres)

2-18-05

239 390 9807

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP20081 (01/04)