

PLEASE READ ALL INSTRUCTIONS BEFORE

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JUN 14 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PO1000017167**

1. Corporation Name

ACCESSIBILITY-ASSISTANCE INC.

2. Principal Office Address

610 East Sample Road

Suite, Apt. #, etc.

3. Mailing Office Address

610 East Sample Road

Suite, Apt. #, etc.

City & State

Pompano Beach, FL

Zip

33064

Country

US

City & State

Pompano Beach, FL

Zip

33064

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

02/15/2001

5. FEI Number

65-1122742

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

Fuller, John

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

12000 BISCAYNE BLVD

Suite, Apt. #, Etc.

Suite # 609

City

NORTH MIAMI

State

FL

Zip Code

33181

800056123308

06/14/05--01005--002 **458 75

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

06-07-05

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
D	Kathy Spalluto	1620 N. Ocean Blvd	Pompano Beach, FL 33062
D	Douglas Spalluto	3962 NW 4th Court	DEERFIELD BEACH, FL 33442

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:

Kathy Spalluto

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06-07-05 (954) 946-4425

Date

Daytime Phone #

CR2E081 (01/05)

Accessibility-Assistance, Inc.

610 East Sample Road, Pompano Beach, FL 33064

VOICE: (954) 946-4475 FAX: (954) 781-1282

FED ID#: 65-1122742

June 7, 2005

Division of Corporation
P.O. Box 6327
Tallahassee, Fl. 32314

Dear Mr.

We did not receive any notices for renewal in 2003 or 2004. When we went on the Internet to add an officer, we discovered that the corporate status was inactive. We tried to re-activated, we could not do this online, then we spoke with customer services, and they told us that we should send a fee for \$450.00 and a letter explaining that we did not receive any notices. Enclosed is our check for \$450.00 and the letter explaining the lack of the notice along with the corporation reinstatement form 2005.

Upon your review, if you have any questions, or require additional information, please do not hesitate to contact us at (954) 946-4475

Sincerely,

Kathy Spallute

