

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000033282

1. Corporation Name

M.D.M. BUILDING, CORP.

FILED
04 FEB 24 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

1737 SW 43RD AVE
PLANTATION FL 33317

1737 SW 43RD AVE
PLANTATION FL 33317

2310 CUYLER ST.
MIMS, FL. 32754

2310 CUYLER ST.
MIMS, FL. 32754

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
2310 CUYLER ST.
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable
2310 CUYLER ST.
Suite, Apt. #, etc.

City & State

MIMS, FL.

Zip
32754

Country

USA

City & State

MIMS, FL.

Zip
32754

Country

USA



REINSTATEMENT 03-54

4. Date Incorporated or Qualified
To Do Business in Florida

03/28/2001

5. FEI Number

65-1088391

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	MELOCHE, MARCO F	1737 SW 43RD AVE	PLANTATION FL 33317
D	PYONTKA, DIANA	1737 SW 43RD AVE	PLANTATION FL 33317

500029308295
02/24/04 01039 023 **300.00

8. Name and Address of Current Registered Agent

MELOCHE, MARCO F
1737 SW 43RD AVE
PLANTATION FL 33317

2310 CUYLER ST.
MIMS, FL.
32754

9. Name and Address of ~~the~~ Registered Agent

Name

MELOCHE MARCO F

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

2310 CUYLER ST.

Suite, Apt. #, Etc.

City

MIMS

State

FL

Zip Code

32754

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Marco Meloch
REGISTERED AGENT MUST SIGN

Date

2/20/04

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/20/04 321-264-6194

CR20040 (7/03)

M.D.M.BUILDING CORP.

2310 CUYLER ST
MIMS, FL 32754
321-264-6194
FAX 321-269-1420

February 20, 2004

IM SENDING YOU A LETTER STATING THAT I RECEIVED
MY APPLICATION FOR REINSTATEMENT LATE , BECAUSE I MOVED AND THEY
DID NOT FORWARD IT AT THE TIME .IM SENDING YOU MY CHECK OF \$300.00 TO
BE REINSTATE .

THANK YOU M.D.M. BUILDING CORP.
X DIANA PYONTKA

