

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENTFLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS04 FEB 25 AM 10:04  
(H04000040979 3)  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000061780

1. Corporation Name

RJS MAINTENANCE CORP.

Principal Place of Business

Mailing Address

7420 W 20TH AVE #443  
HIALEAH FL 330187420 W 20TH AVE #443  
HIALEAH FL 33018

REINSTATEMENT

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

06/21/2001

5. FEI Number

65-1116436

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
PD	CANDIDO, SURAMA	7420 W 20TH AVE., APT 443	HIALEAH FL 33018

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CANDIDO, SURAMA  
7420 W 20TH APT #443  
HIALEAH FL 33018

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

S. Candido

Surama Candido

Date 2/24/04

REGISTERED AGENT MUST SIGN

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.

(H04000040979 3)

SIGNATURE:

S. Candido

Surama Candido

2/24/04

(305) 827-2059

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Division of Corporations

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Florida Department of State  
Division of Corporations  
Public Access System

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(((H04000040979 3)))

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## To:

Division of Corporations  
Fax Number : (850) 205-0384

## From:

Account Name : ANA DALMAU ARES, P.A.  
Account Number : I20000000268  
Phone : (305) 229-8256  
Fax Number : (305) 229-8252

## CORPORATION REINSTATEMENT

## RJS MAINTENANCE CORP.

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$908.75

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