

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000062142

1. Corporation Name

MICHAEL VAZQUEZ BACKHOE SERVICE, INC.

Principal Place of Business

14981 SW 306ST
HOMESTEAD FL 33033

Mailing Address

PO BOX 970401
MIAMI FL 33157-0401

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 & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/21/2001

5. FEI Number

65-7117710

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)

Title(s)

Name of Officers
and/or Directors

3

Street Address of Each
Officer and/or Director

City / State / Zip

owner Michael Vazquez

183 NW 16th

Homestead Fl. 33033

8. Name and Address of Current Registered Agent

VAZQUEZ, MICHAEL E
30411 SW 157 AVE
HOMESTEAD FL 33033

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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 Michael Vazquez **SIGNATURE REQUIRED**

REGISTERED AGENT MUST SIGN

Date 11-08-02

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: Michael Vazquez **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 11-08-02

305-970-5796

Date

Daytime Phone #

FILED

02 NOV 16 PM 12:42

SECRETARY OF STATE

500008998025

11/14/02--01037--010 **150.00



CR2E040 (8/02)

November 8, 2002

Dept. of State

RE: Michael Vazquez Backhoe Service, Inc.

FEI #: 65-1117710

PO Box 970401

Miami, FL 33157-0401

~~To Whom It May Concern:~~

Per my conversation with an examiner on November 6, I am enclosing a check for the \$150.00 for the reinstatement of my corporation. I explained to the examiner I never received the first notice of renewal and did not want a dissolution or revocation to be instated. I apologize for any inconvenience and appreciate your time. If you have any questions my phone number is 305-970-5796.

Sincerely,

Michael Vazquez