PLEASE-READ ALL INSTRUCTIONS BEFORE COMPLETING THIS EDRM.

CORPORATION	
REINSTATEMENT	



### FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # PUT 0000 6 4917

Micheline Dionne

A1Dependable Plumbing Service, Inc

2006 JUL 24 AM 10: 47

SECRETARY OF STATE TALLAHASSEE, FLORIDA

000078224140 08/01/06--01039--018 \*\*45

l.				Li Companya da Com								
2. Principal Office Address 1101 NW 89th Terrace Suite, Apt. #, etc. City & State Pembroke Pines, Florida		3. Mailing Office Address 1101 NW 89th Terrace Suite, Apt. #, etc  City & State Pembroke Pines, Florida		CR2E081 (12/05)  4. Date Incorporated or Qualified To Do Business in Florida  June 27, 2001								
							5. FEI Number 651117288	Applied For Not Applicable				
							Zip 33024	Country U.S.A	33024	Country U.S.A		\$8.75 Additional Fee required for a Certificate of Status
									7. Name a	nd Address of Current Regis	stered Agent	

No mail delivry in Coleman please used P.O.Box 771

Street Address (P.O. Box Number is Not Acceptable) 5301 E. Warm Springs Avenue

	Coleman Coleman		State FL	Zip Code 33521
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Signature of Registered Agent  REGISTERED AGENT MUST SIGN				05 or 617.0503, F.S. June 29, 2006
9. Name	es and Street Addresses of Each Officer and/or Direc	tor (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
Р	Farber, Adam	1101 NW 89th Terrace	Pem	broke Pines,FI 33024
٧	Martin, Tina	1101 NW 89th Terrace	Pem	broke Pines,Fl 33024
S	Dionne, Micheline	P.O.Box 771	Cole	eman, Florida 33521
		REPUTATEM	WT	B 1 26/24
L				

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 contained in Chapter 119, 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 ARD TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

352-536-0741

Date June 29,06 Daytima Phone #

prerd

## A1 Dependable Plumbing Service, Inc

# Memo

To: Department of State/Division of Corporations

From: A1 Dependable Plumbing Service

**CC:** Division of Corporation

Date: June 29, 2006

Re: Corporation Reinstatement

#### **How to Use This Memo Template**

As per conversation with an Officer of the Corporation Department I was instructed to write this

Note in reference to the Re-instatement of the corporation involve A1 Dependable Document no#

P01000064917. I did not received any form card or any correspondence on this Corporation Since my
last correspondence in 2003. I made a change of address. For unknown reason was not enter.

Any correspondence to 2565 Kerry Drive will not reach me because the new Owner will disregard

any mail which doesn't pertain to them. So I did advise the department of the change.

### The New Address is 1101 NW 89th Terrace, Pembroke Pines Florida 33024.

As per the Clerk or Officer of your department I am sending you this note and including a check for the Amount indicated to me of \$450.00.

Thank You for prompt attention and also your very courteous employee.

It is not very often these days someone will take time to listen to you.

Yours Truly

Micheline Dionne (secr)

A1 Dependable Plumbing Service, Inc.