

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JAN -2 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

CUSTOM METAL CREATIONS INC.

PO1000106579

900009790309
01/02/03--01070--018 **450.00

2. Principal Office Address

8 JEFFERSON PL NW

Suite, Apt. #, etc.

3. Mailing Office Address

8 JEFFERSON PL NW

Suite, Apt. #, etc.

City & State

FT WATSON BEACH FL

City & State

FT WATSON BEACH FL

Zip

32548

Country

OKALOOSA

Zip

32548

Country

OKALOOSA

4. Date Incorporated or Qualified
To Do Business in Florida

11-05-2001

5. FEI Number

☒ 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

Richard A. FALASCA

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

763 SPRING LAKE DRIVE

Suite, Apt. #, Etc.

City

DESTIN FL

State

FL

Zip Code

32541

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

Richard A. Falasca
REGISTERED AGENT MUST SIGN

Date

Dec 20-02

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
P	Richard A. FALASCA	763 Springlake Dr	Destin FL 32541
T	Richard A. FALASCA	763 Springlake Dr	Destin FL 32541
V	Sylvia E FALASCA	763 Springlake Dr	Destin FL 32541
S	Richard A. FALASCA	763 Springlake Dr	Destin FL 32541

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:

Richard A. Falasca
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dec 20-02

Daytime Phone #

850-243-9622

Falasca's Services, Inc.
8 Jefferson Place
Ft. Walton Beach, FL 32548

December 26, 2002

Florida Dept. of State
Divisions of Corporations
P.O. Bos 6327
Tallahassee, FL 32314

Attn: Secretary of State

Re: Falasca Services, Inc. and
Custom Metal Creations, Inc.

To whom this may concern:

This letter is to inform you that **Falasca's Services, Inc.** and **Custom Metal Creations, Inc.** did not receive any forms to renew or reinstate each of the afore mentioned companies. Both of these companies are located at the same address.

It appears there was a delivery problem for the postal service as the building next door has the same number on their door, but as a unit number and not street number. I discussed this with the postal service and the owner of the building next door and I believe the problem has been resolved.

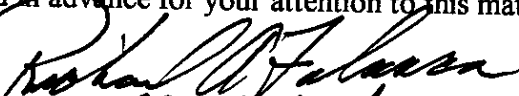
I was told by telephone the cost to renew or reinstate would be as follows:

Falasca's Services, Inc. at \$300.00
Custom Metal Creations, Inc. at \$150.00

As acting president of both companies I am including two checks to cover both amounts.

I thank you in advance for your attention to this matter.

Sincerely,


President of.

Richard A. Falasca
President: Falasca's Services, Inc.
Custom Metal Creations, Inc.
8 Jefferson Place NW
Ft. Walton Beach, FL 32548