

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 APR 23 AM 11:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P02000002833**

**1. Corporation Name**

Spectrum Painting & Decorating, Inc.

**2. Principal Office Address**

123060 SW 132 Court

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33186

Country

Dade

**3. Mailing Office Address**

12306 Sw 132 Court

Suite, Apt. #, etc.

City & State

Miami, Florida

Zip

33186

Country

Dade

**4. Date Incorporated or Qualified  
To Do Business in Florida 1/9/02**

**5. FEI Number**

90-0002093

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☐**

\$8.75 Additional Fee required  
for a Certificate of Status

**REINSTATEMENT 03-04**

500033566695  
04/22/04--01053--010 \*\*300.00

**7. Name and Address of Current Registered Agent**

Name

Caridad Perez

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

15141 Sw 59th Street

Suite, Apt. #, Etc.

City

Miami, Florida

State

FL

Zip Code

33186

**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

REGISTERED AGENT MUST SIGN

Date

4/16/04

**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
psd	Caridad Perez	15141 SW 59th	Miami, Florida 33193

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/16/04

Daytime Phone #

CR2E081 (01/04)



# **SPECTRUM PAINTING & DECORATING, INC.**

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April 16, 2004

Department of State  
Division of Corporation  
P.O. Box 6327  
Tallahassee, Florida 32314

To Whom It May Concern:

I contacted your office today April 16, 2004 and spoke with Katrina in reference to my corporation showing inactive at your website sunbiz.org. She immediately explained to me that I should have received some forms that must be filled yearly, which I was not aware of.

Katrina asked me to download the form attached (corporation reinstatement) with this letter and a check for three hundred dollars which would make us current.

We at Spectrum Painting & Decorating, Inc. apologize for any inconvenience this may have caused.

Thank you,

Caridad Perez  
President