

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000005444

1. Corporation Name

METRO Plumbing Inc.

2. Principal Office Address - No P.O. Box #

14520 PEEBLES DR.

Suite, Apt. #, etc.

City & State

ASTATULA, FL

Zip

34705

Country

U.S.A.

3. Mailing Office Address

14520 PEEBLES DR.

Suite, Apt. #, etc.

City & State

ASTATULA, FL

Zip

34705

Country

U.S.A.

7. Name and Address of Current Registered Agent

Name

JASON MARRE

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

14520 PEEBLES DR.

Suite, Apt. #, Etc.

City

Astatula

State

FL

Zip Code

34705

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 10/7/2010

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	Jason Marre	14520 Peebles Dr	Astatula, FL 34705

10. E-mail Address: JASON MARRE @ YAHOO . COM

(To be used for future annual report notification)

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. I further certify, 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:

JASON MARRE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/7/2010 321-303-4939

Date

Daytime Phone #

FILED

2010 OCT 25 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000186705620
10/26/10--01027--002 **150.00

CR2E081 (6/10)

4. Date Incorporated or Qualified
To Do Business in Florida

1/16/2002

5. FEI Number

30 0021255

☐ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

000186705620
10/15/10--01003--021 **785.00

REINSTATEMENT 09-10