

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000009566

1. Corporation Name

F & M STUCCO AND DRYWALL, INC

2. Principal Office Address

3000 ROYAL PALM AVE

Suite, Apt. #, etc.

City & State

FT. MYERS FL.

Zip

33901

Country

LEE

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

01/17/02

5. FEI Number

04-3591009

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

EDWARDS DIAN M

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

1852 40TH TERRACE SW

Suite, Apt. #, Etc.

UNIT B

City

NAPLES

State

FL

Zip Code

34116

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

Date 10/30/2003

REGISTERED AGENT MUST SIGN

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	RENE FLOREXIL	3000 ROYAL PALM AVE	FT. MYERS 33901

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

10/30/2003

Date

Daytime Phone #

03 NOV 21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COPY

REINSTATEMENT 03

CR2E081 (10/02)

ALPHA ACCOUNTING SERVICES, INC.
1852 B 40TH TERRACE SW
NAPLES, FL. 34116
TEL: 239-455-3047, FAX: 239-455-5133

November 20, 2003

Attention: RE-ENSTATEMENT

DIVISION OF CORPORATIONS
SECRETARY OF STATE
RE-ENSTATEMENT DIVISION
409 EAST GAINS ST
TALLAHASSEE, FL 32399

Dear Sir/Madam

RE: F & M STUCCO AND DRYWALL, INC-P02000009566

This letter is to notify you that this Corporation did not receive a first renewal notice of the original form in January 2003.

We have since on November 4, 2003 submitted a copy of the renewal form from the Internet, and a check in the sum of \$150. On viewing the Public Records on the computer we have noticed that our renewal has not been effective.

Per our Conversation on November 20, 2003, I am resubmitting a copy of the form to you with a new check in the amount of \$150.00. In light of these issues we are asking that the \$600.00 be waived.

Yours truly,



DIAN EDWARDS
PRESIDENT

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