

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000013537

1. Corporation Name

EATON - HAGEN ENTERPRISES, INC.

2. Principal Office Address

4404 GILPIN WAY

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

32812

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 03

100023635381

10/08/03--01011--006 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

2/05/2002

5. FEI Number

43-1949240

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

DAVID W. EATON

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

4404 GILPIN WAY

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32812

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

DAVID W. EATON

Date

9/30/03

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
<u>PRESIDENT</u>	<u>DAVID W. EATON</u>	<u>4404 GILPIN WAY</u>	<u>ORL FL 32812</u>

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:

DAVID W. EATON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

9/30/03

Daytime Phone #

407-380-1678

9/10/27

CR2E081 (10/02)

To: Florida Dept. of State
Division of Corporations

9/30/03

From : Eaton-Hagen Enterprises, Inc.
D.B.A. Diversified Services Group
4404 Gilpin Way
Orlando, Fl. 32812

Re; Corporation # P02000013537

To Whom it May Concern,

This letter is to inform you that I did not receive the annual Corporation renewal forms, and as such feel that our current inactive status is in error. Enclosed please find the reinstatement application and renewal fee. I would appreciate rectification of this situation as soon as possible.

Thank You,



David W. Eaton
President, DSG