

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 31 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000017855**

1. Corporation Name

MONROE INSPECTION & EXTERMINATING INC.

Principal Place of Business

3851 JACKSON BLVD.
FT. LAUDERDALE FL 33312

Mailing Address

3851 JACKSON BLVD.
FT. LAUDERDALE FL 33312



REINSTATEMENT 03

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/13/2002

5. FEI Number

145-0480696

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	MONROE, DAVE	3851 JACKSON BLVD.	FT. LAUDERDALE FL 33312
DT	MONROE, CHEDDY	3851 JACKSON BLVD.	FT. LAUDERDALE FL 33312

300024330083
10/31/03-01032-001 **150.00

8. Name and Address of Current Registered Agent

MONROE, DAVE
3851 JACKSON BLVD.
FT. LAUDERDALE FL 33312

9. Name and Address of New Registered Agent

Name

MUNROE

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/23/2003

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 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:

DAVE MUNROE (PD)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/23/2003 (94)581-6772

Date

Daytime Phone #

CR2E040 (7/03)

MUNROE INSPECTIONS AND EXTERMINATING INC.
3851 JACKSON BOULEVARD
FORT LAUDERDALE, FL 33312

TELE: (954) 581-6772

FAX: (954) 581-9940

October 20, 2003

Florida Department of State
Glenda E. Hood
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sirs,

Re: Notice of Administrative Dissolution or Revocation

This serves to inform you that the annual reports/uniform business reports mentioned in your letter were not received. The only package received from your department is the above-mentioned.

Enclosed is a check for One Hundred and Fifty Dollars (\$150.00) along with the form sent.

Your corporation on this matter will be greatly appreciated.

Regards,



Dave Munroe
President
Munroe Inspections and Exterminating Inc.

Encl.