

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 OCT 20 PM 12:28

DOCUMENT # P02000024258

**1. Corporation Name**

E.Q. MASTER'S PAINTING CORP.

2800 S. ORANGE BLOSSOM TRAIL  
P.O. BOX 590443

**2. Principal Office Address**

2800 S. ORANGE BLOSSOM TRAIL

**3. Mailing Office Address**

P.O. BOX 590443

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

City & State

ORLANDO, FLORIDA

Zip

32805

Country

USA

Zip

32859

Country

USA

**4. Date Incorporated or Qualified**

To Do Business in Florida 02-26-02

**5. FEI Number**

23-1638758

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

EDISON QUEVEDO

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

2800 S. ORANGE BLOSSOM TRAIL

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32805

**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 **OCTOBER 6, 2004**

**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
PRES	EDISON QUEVEDO	P.O. BOX 590443	ORLANDO, FLORIDA 32859

**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

10-6-04

Date

Daytime Phone #

CR2E081 (01/04)

July 2, 2004

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Florida 32302-1500

Re: E.Q. Master's Painting Corp.  
2800 S. Orange Blossom Trail  
Orlando, Florida 32805  
or  
P.O. Box 590443  
Orlando, Florida 32859  
Document #: P02000024258

Dear Sir/Madam:

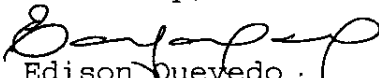
This letter is to inform you that we never received the initial mailing of the 2003 Uniform Business Report.

We realize that it is our responsibility to know when deadlines are and when payments are due, but unfortunately we tend to get caught up in our own hectic daily routine and sometimes days just slip by us unknowingly and with that having been our first year, we just were not aware of it.

We ask that you accept our appologize and our check for the annual report fee of \$ 300.00.

Thank you in advance for your cooperation and understanding in this matter.

Sincerely,

  
Edison Quevedo  
President