

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 OCT -3 AM 10:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000028561

1. Corporation Name

Anything Screened inc.

REINSTATEMENT 03

800023546478  
10/03/03--01069--002 \*\*150.00

2. Principal Office Address

725 Campbell St SE

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 110187

Suite, Apt. #, etc.

City & State

Palm Bay FL

City & State

Palm Bay FL

Zip

32909

Country

Brevard

Zip

32911-0187

Country

Brevard

4. Date Incorporated or Qualified  
To Do Business in Florida

3-08-2002

5. FEI Number

80-0022332

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

Sandra Smith

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

725 Campbell St SE

Suite, Apt. #, Etc.

City

Palm Bay

State

FL

Zip Code

32907

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

*Sandra Smith*

Date

09-30-03

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
<del>President</del>	Sandra Smith	725 Campbell St SE	Palm Bay FL 32907
<del>Vice President</del>	Michael Smith	725 Campbell St SE	Palm Bay FL 32907
<del>Officer</del>	Michael W Smith	725 Campbell St SE	Palm Bay FL 32907
<del>Officer</del>	Abraham Santiago	557 SARAGASSA ST	Palm Bay FL 32908

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:

*Sandra Smith*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

09-30-03

Daytime Phone #

321 722-  
0479

CR2E081 (10/02)

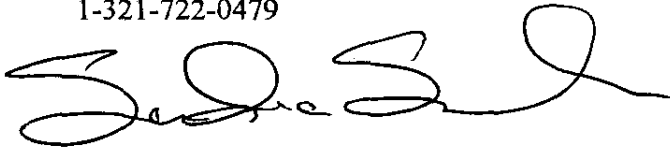
0930-03

To: Department of State  
Division of Corporations

It was brought to my attention on 09-19-03 that my incorporation was dissolved due to a form and fee not being filed. I never received this form, and am thinking it was never forwarded from my previous address. I have listed my permanent and Postal address on all new forms.

Please accept my application for reinstatement; any and all help would be greatly appreciated.

Thank you  
Sandra Smith President  
Anything Screened Inc.  
P.O. Box 110187  
Palm Bay FL 32911-0187  
1-321-722-0479

A handwritten signature in black ink, appearing to read 'Sandra Smith', written in a cursive style.

01-06-03

Annual Meeting of Anything Screened Inc.

At this meeting we are establishing that John Law will no longer be an officer of Anything Screened Inc. due to his incarceration. We are also voting in Abraham Santiago as an officer of the company and issuing ownership in the company. Officer's holdings in the company are as follows.

Sandra Smith President	70% Ownership
Michael L. Smith Vice president	10% Ownership
Michael W. Smith Chairman	10% Ownership
Abraham Santiago Chairman	10% Ownership

Signed

 01-06-03  
President