

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 APR 11 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000048242

1. Corporation Name

Vasquez Home Improvement

2. Principal Office Address

13089 54th Lane N

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33411

Country

USA

3. Mailing Office Address

13089 54th Lane N

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33411

Country

USA

REINSTATEMENT 03-06

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

May 2, 2002

5. FEI Number

43-1958806

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

Ivan Vasquez

800074057748

05/05/06--01030--004 **500 00

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

13089 54th Lane North

Suite, Apt. #, Etc.

City

West Palm Beach

State

FL

Zip Code

33411

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

4-3-06

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>P</u> | <u>Ivan Vasquez</u> | <u>13089 54th Lane N</u> | <u>West Palm Beach, FL 33411</u> |
| <u>V/S</u> | <u>Iris Vasquez</u> | <u>13089 54th Lane N</u> | <u>West Palm Beach, FL 33411</u> |
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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 contained in Chapter 119, 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Iris Vasquez

4-3-06

Date

561-644-3139

Daytime Phone #

292
April 3, 2006

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

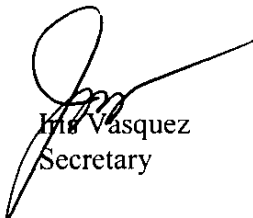
Dear Sirs:

Enclosed you will find a Corporation Reinstatement Form for our company Vasquez Home Improvement Inc., which began on May 2, 2002.

Since we didn't receive the annual report notice in the year ²⁰⁰³ of dissolution/revocation or certificate of dissolution, we formally ask to your office to waive the fees for reinstatement.

Hopping this matter can be solved as soon as possible.

Sincerely your,


Irma Vasquez
Secretary

Cc: Files