

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 22 AM 11:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000054067

1. Corporation Name

GARY FULLER MARINE DETAIL, INC.

Principal Place of Business

148 YACHT CLUB DR

#4

NORTH PALM BEACH FL 33408

Mailing Address

148 YACHT CLUB DR

#4

NORTH PALM BEACH FL 33408



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

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

05/16/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	FULLER, GARY	148 YACHT CLUB DR. #4	NORTH PALM BEACH FL 33408

10/28

500024023245
10/22/03 01064 014 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FULLER, GARY

148 YACHT CLUB DR.

#4

NORTH PALM BEACH FL 33408

Name

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

X Gary Fuller

REGISTERED AGENT MUST SIGN

Date

10-15-03

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:

X Gary Fuller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-15-03

Daytime Phone #

CH2E040 (7/03)

Gary Fuller Marine Detail, Inc.

148 Yacht Club Drive #4
North Palm Beach, FL 33408
561-762-2678

October 15, 2003

Glenda E. Hood
Florida Department of State
Division of Corporations
POB 6327
Tallahassee, FL 32314

Dear Sir or Madam:

I was extremely surprised to receive your Notice of Administrative Dissolution or Revocation. I have always filed and paid all the appropriate fees and taxes for both, personal and business requirements. I did not receive the notices about UBR filing and thus did not realize that the fee was due.

Enclosed is a completed application for reinstatement and the UBR filing fee of \$150. The document number of the corporation is P02000054067. Should you require any further information, I may be reached at 561-762-2678.

Thank you for your assistance with this matter.

Gary Fuller, President
Gary Fuller Marine Detail, Inc.

A handwritten signature in black ink that reads "Gary Fuller". The signature is written in a cursive, flowing style with a large initial "G" and "F".