

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 DEC 16 PM 12:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000061213

1. Corporation Name

ONE SONG POOLS, INC.

Principal Place of Business

Mailing Address

1201 S DIXIE HWY #TTC 2
POMPANO BEACH FL 33060

1201 S DIXIE HWY #TTC 2
POMPANO BEACH FL 33060

REINSTATEMENT 07

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/03/2002

5. FEI Number

01-0711827

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
PSTD	ERICKSON, TIMOTHY D	1201 S DIXIE HWY #TTC-2	POMPANO BEACH FL 33060

~~700025609057~~
12/16/03--01057--031 **150.00

700025609057
12/19/03--01057--031 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

STEPHEN W GILBERTSON CPA
2200 NE 26 STREET
WILTON MANORS FL 33305

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

Signature of Registered Agent

Date

12/9/03

REGISTERED AGENT MUST SIGN

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:

Signature of Timothy D. Erickson
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ERICKSON
12/9/03
954
784-9048
Date
Daytime Phone #

CR2E040 (7/03)

**ONE SONG POOLS, INC.
1201 S DIXIE HIGHWAY, TTC2
POMPANO BEACH, FLORIDA 33060**

December 9, 2003

**Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314-6327**

Gentlemen:

I recently became aware that I have received a Certificate of Administrative Dissolution or Revocation for my corporation. My accountant brought this to my attention. I am requesting that the penalty of \$600.00 be abated and I am submitting a check for \$150.00, which is the normal fee. I have no idea what happened to the notices that I should have received from your office.

Please abate the penalty.

Very truly yours,

A handwritten signature in cursive script that reads "Timothy Erickson".

Timothy Erickson, President