

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 NOV 12 AM 10:21

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P02000061856**

1. Corporation Name

EXTERIOR EXPRESSIONS ROCK & WATERSCAPE, INC.

Principal Place of Business

Mailing Address

6440 GARDEN RD
RIVIERA BCH FL 33407

6440 GARDEN RD
RIVIERA BCH FL 33407



REINSTATEMENT

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

06/04/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

Not Applicable

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
TS	ALLEN, ROBERT M	6440 GARDEN RD	RIVIERA BCH FL 33407
			200024578752 11/12/03--01009--011 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ALLEN, ROBERT M II
6440 GARDEN RD
RIVIERA BCH FL 33407

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Robert M Allen
REGISTERED AGENT MUST SIGN

Date

11-06-03

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:

Robert M Allen
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-6-03

904-522-0356

CR2E040 (7/03)



Robert M Allen II
Exterior Expressions
Rock and Waterscape

6440 Garden Road
Riviera Beach FL 33404

Date: November 6, 2003
To: Florida Department of State
From: Robert M. Allen II
Subject: Corporate Reinstatement

Dear Florida Department of State,

I, Robert M. Allen II am the President and registered agent of Exterior Expressions Rock and Waterscape. Our office has never received a notice of any kind including the UBR notices.

The notice of administrative dissolution is the only notice we received. The corporation did not do business until 2003.

I have enclosed a check for 150.00 dollars to reinstate the corporation to active status.. I have informed my staff in Riviera Beach to be sure to forward all forms and reports required by the State of Florida to our accounting department upon receipt for timely processing.

Thank you for your help.

Sincerely,


Robert M. Allen II
President