

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 DEC 22 PM 4:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02 000062276**

1. Corporation Name

Fabulous Frame & ARTWORK

2. Principal Office Address

2602 PGA BLVD

Suite, Apt. #, etc.

City & State

Palm Beach GARDENS, FL

Zip

33410

Country

USA

3. Mailing Office Address

2602 PGA BLVD

Suite, Apt. #, etc.

City & State

Palm Beach GARDENS, FL

Zip

33410

Country

USA

REINSTATEMENT 03

**4. Date Incorporated or Qualified
To Do Business in Florida**

6-5-2002

5. FEI Number

43-1967720

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

Roy S. WIBLE

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

16519 N.W. 27th Avenue

Suite, Apt. #, Etc.

City

OPA LOCKA

State

FL

Zip Code

33051

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

Roy S. Wible

Date

12/18/03

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
P	Jon Leighton	426 30th St	West Palm Beach, FL 33407
S	Brenda Fantacci	426 30th St	West Palm Beach, FL 33407

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:

Brenda Fantacci **Brenda Fantacci** **12/17/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

561-832-7549

Daytime Phone #

CR2E081 (10/02)

December 17, 2003

Florida Department of State
Secretary of State
Division of Corporations

Re: Reinstatement

To Whom It May Concern:

I have recently come to realize that I did not receive our annual renewal notice for our corporation, Fabulous Frame & Artwork, document # P02000062276 and therefore it has lapsed and is currently in an inactive status. In fact, I have never received any notification from your office whatsoever. I spoke to an agent this morning who advised that I send in the reinstatement form and letter requesting the penalty fee be waived in lieu of the fact that notification was never received by me.

I respectfully ask that the reinstatement fee be waived and our corporation status reactivated. Please find enclosed the reinstatement form and a check for one hundred and fifty dollars. I thank you in advance for your acceptance and attention to this matter.

Please note the principle address and mailing address on this reinstatement form is correct and is where all documents should be mailed.

If you have any questions please contact me at 561-624-3220.

Sincerely,

A handwritten signature in cursive script that reads "Brenda Fantacci". The signature is written in dark ink and is positioned above the typed name and address.

Brenda Fantacci
2602 PGA Blvd
Palm Beach Gardens, FL 33410