PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P02000062461

1. Corporation Name

DENISE FIX, INC.

Principal Place of Business

Mailing Address

612 GREEN MEADOW AVE MAITLAND FL 32751

SIGNATURE:

612 GREEN MEADOW AVE MAITLAND FL 32751 FILED

03 OCT 28 AM 9:21

SECRETARY OF STATE FALLAHASSEE, FLORIDA

REINSTATEMENT 03

If above addresses are incorrect in any way, line through incorrect information and enter correction below.						1=10# 46-0484763			
			illing Office Address, If Applicable				orated or Qualified ness in Florida	06/01/20	ากว
Suite, Apt. #, etc. Suite,		Suite, Apt. #,	ite, Apt. #, etc.			5. FEI Number	· · · · · · · · · · · · · · · · · · ·	~~	Applied For
Gity & State LAWD CL. City & State			TLAND, PL.			46-	04841	85	Not Applicable
zip32751 Seminole Zip327			5) Seminole			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)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director						ı
Presid	ent-Denise F	·ίγ	612	61	reen Me	adow Au	e. Mait	-land	F1. 327
Vice	President - Nico	lasA	ila-	- 10	2409 CC	zcroll?	ace, (Aw	ypa, P	133612
Sec.	Angela Wood	dard	-939	91	1. River	HILIST	rTemp	deter	rFl.
Trea	surer-Denise	FIX-	626	ree	n Meado	u Ave.	Maitan	d, Pl	. 3275
		All a second				50 107287	002419 03010230	7405 118 **13	50.00
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent			
RUSSELL, G.H. JR					Name				
9308 OLD PASCO RD				Street Address (P.O. Box Number is Not Acceptable)					
WESLEY CHAPEL FL 33544					Suite, Apt. #, Etc.				
					City			State Zip (Code
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the adjustions of Section 607.0505, F.S. or 617.0505, F.S.									
Signature of Registered Agent Date 10.22-03									
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 filling									

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.

Denise Fix, Inc 612 Green Meadow Ave. Maitland, Florida 32751 407-740-6513 EIN # 215 516 1196 10/22/03

To whom this may concern;

Denise Fix, Inc did not receive the two prior uniform business report (UBR) notices. PLEASE, waive and reinstate the Corp.

Thank You,

Registered Agent

Russell, G. H. JR.

President

Denise Fly