

Page 1 of 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 AUG -9 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000063517**

1. Corporation Name

Pruitt Industries, Inc

2. Principal Office Address

2045 N. Monroe St

Suite, Apt. #, etc.

3. Mailing Office Address

2045 N. Monroe St

Suite, Apt. #, etc.

City & State

Tallahassee, FL

City & State

Tallahassee, FL

Zip

32303

Country

USA

Zip

32303

Country

USA

REINSTATEMENT

03-04

4. Date Incorporated or Qualified
To Do Business in Florida

6/7/02

5. FEI Number

412 046230

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

Ruth Pruitt

Address (This information is not acceptable)

2045 N. Monroe St.

Suite, Apt. #, etc.

City

Tallahassee

State

FL

Zip Code

32303

800040222348

08/16/04--01071--023 **300.00

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

Ruth A Pruitt

Date

8/3/04

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
D	mike Pruitt	2045 N. Monroe St	Tallahassee, FL 32303
D	Ruth Pruitt	2045 N. Monroe St	Tallahassee, FL 32303

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:

Ruth A Pruitt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/04

Date

531-9032

Daytime Phone #

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Page 2 of 3

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2003
04 AUG -9 AM 10:25
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000063517**

1. Corporation Name

Pruitt Industries, Inc

2. Principal Office Address

2045 N. Monroe St

Suite, Apt. #, etc.

City & State

Tallahassee, FL

Zip

32303

Country

USA

3. Mailing Office Address

2045 N. Monroe St

Suite, Apt. #, etc.

City & State

Tallahassee, FL

Zip

32303

Country

USA

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

6/7/02

5. FEI Number

412046230

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

Ruth Pruitt

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

2045 N. Monroe St

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32303

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

Ruth A Pruitt

Date

8/3/04

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
D	Mike Pruitt	2045 N. Monroe St	Tallahassee, FL 32303
D	Ruth Pruitt	2045 N. Monroe St	Tallahassee, FL 32303

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:

Ruth A Pruitt

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/04

Date

531-9032

Daytime Phone #

CR2E081 (01/04)

Florida Dept of State

8-3-01

Page 3 of 3

To Whom It may concern:

I am sending this letter in response to an email I received letting you know that we had not received the annual report for Pruitt Industries, Inc and ask you to please wave the reinstatement fee and accept the annual reports plus the \$150.00 filing fee for last year and this year.

We were formerly Pruitt Enterprises, Inc P95000050161 and received FEI 593242414

3 annual report forms including one in a registered letter.

But we did not receive any for our new corporation Pruitt Industries, Inc
PO2000003517
FEI 412046230

Both corporations were dissolved on the same date 9/19/03 not sure why?

W/ 531-9032 Ruth A Pruitt
Fax 531-9035 Registered Agent