

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM...

1 & 2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 28 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000065387

1. Corporation Name

Masonry By Rick, Inc.

2. Principal Office Address

Same

Suite, Apt. #, etc.

City & State

Tampa FL

Zip

Country

3. Mailing Office Address

8425 N. Albany Ave.
Tampa, FL 33604

Suite, Apt. #, etc.

City & State

Tampa FL

Zip

Country

33604

REINSTATEMENT 2004

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

56-2286764

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

Kathy L. Cole

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

205 W. M.L. King Blvd. #204

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33603

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

Kathy L. Cole

Date 10-12-2004

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	Richard Basham	8425 N. Albany Ave.	Tampa, FL 33604

3010042282323
10/28/04--01035--014 **150.00

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:

Richard Basham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E001 (01/04)

2642

Division Of Corporation
P.O. Box 6327
Tallahassee, FL. 32314

October 10, 2004

RE: MASONRY BY RICK, INC.
#P02000065387

Dear Sir:

Please be advised that Masonry By Rick, Inc.. did not receive the initial annual notice. Therefore, we are asking that you waive any additional fees at this time.

We are enclosing a check for \$150.00 in order the renew Masonry By Rick, Inc. If you have any questions please call.

Respectfully,



Richard Basham
President