

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 FEB 17 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000077516

1. Corporation Name

BERNARDO RODRIGUEZ CARPENTRY, INC.

2. Principal Office Address
1402 LAKE AVE

Suite, Apt. #, etc.

City & State

LAKE WORTH

Zip

33460

Country

USA

3. Mailing Office Address
SAME

Suite, Apt. #, etc.

City & State

FLORIDA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

161658003

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

RODRIGUEZ, BERNARDO

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

1402 LAKE AVE

Suite, Apt. #, Etc.

City

LAKE WORTH

State

FL

Zip Code

33460

800029030708
02/18/04 01054 006 **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

Bernardo Rodriguez

REGISTERED AGENT MUST SIGN

Date 2/05/04

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
OWNER	RODRIGUEZ, BERNARDO	1402 LAKE AVE	LAKE WORTH, FL 33460

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:

Bernardo Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/05/04

Date

Daytime Phone #

CR2001 (01/04)

Attachment

BERNARDO RODRIGUEZ CARPENTRY, INC
1402 LAKE AVE
LAKE WORTH, FL 33460

FEBRUARY 5, 2004

FLORIDA DEPARTMENT OF STATE
P O BOX 6327
TALLAHASSEE, FL 32314

RE: P02000077516

TO WHOM IT MAY CONCERN:

THE REASON OF THIS LETTER IS BECAUSE ON FEBRUARY 3RD 2004, I RECEIVED A LETTER FROM YOUR DEPARTMENT DATED APRIL 16, 2003 IT WAS SEAT IN MY MAILBOX SINCE THAT TIME, BECAUSE I WAS DOING MY WORK IN ANOTHER STATE.

I AM SENDING COPY OF THE LETTER YOU SENT ME, COPY OF THE CHECK FOR THE AMOUNT OF \$150.00 DOLLARS THAT WAS SENT TO YOUR DEPARTMENT AND WAS RETURNED TO ME BECAUSE I FORGOT TO PUT SOME INFORMATION ON LINE 4, BUT AS I SAID I WAS NOT IN THIS STATE I WAS UNABLE TO RESPOND TO YOUR LETTER AT THAT TIME BECAUSE THE ABOVE MENTIONED MATTER, NOW I HAVE TO REINSTATE MY CORPORATION, AND I WOULD LIKE TO KNOW IF YOU CAN GRANT ME A WAIVER OF THE \$600.00 DOLLARS.

AS OUR PREVIOUS CONVERSATION YOU ASKED ME TO WRITE THIS LETTER AND SEND A CHECK FOR THE AMOUNT OF \$300.00 DOLLARS TO PAY THE TAX YEARS 2003 & 2004.

I AM VERY SORRY FOR THE INCONVENIENCE. THANK YOU VERY MUCH FOR YOUR ATTENTION TO THIS MATTER.

SINCERELY,

Bernardo Rodriguez

BERNARDO RODRIGUEZ
D/B/A BERNARDO RODRIGUEZ CARPENTRY INC
P02000077516