1472

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 JAN 27 PM 2:34

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000077752

1. Corporation Name
Michael J. Painting, Corp.

REINSTATEMENT 04-05

09/09/04 90013 046 #150.00

2. Principal Office Address	3. Mailing Office Address
1060 NW 112 Ter	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, FL	City & State
Zip: 33168 Country: U.S.A.	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 07/17/02

5. FEI Number: 14-1838625 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: Jose E. Umanzor

Street Address (P.O. Box Number is Not Acceptable): 1060 NW 112 Terrace

Suite, Apt. #, Etc.:

City: Miami State: FL Zip Code: 33168

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: Jose E. Umanzor Date: 1/20/05

REGISTERED AGENT MUST SIGN

CR2E061 (9/01)

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
PS.	Jose E. Umanzor	1060 NW 112 Terrace	Miami, FL 33168

800045896958
02/03/05--01009--007 **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: Jose E. Umanzor 1/20/05 305-926-9509

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Division of Corporations

Enclosed please find a reinstatement form and a check for #150.00 for my 2005 annual report. I sent in my annual report last year and my check was cashed but I have been told that my company is inactive. I didnot receive any notice in the mail so I thought everything was fine. Please help me clear this. Thank you for your time.

Jose E. Umanzor

Re: Michael J. Painting, Corp.
Doc. # P02000072752

Charter Number Only

1/26

Atlantic Stamp
Requestor's Name

Address

City State ZIP Phone

1592B

VALIDATION ONLY

CORPORATION(S) NAME

Michael J. Painting, Corp.

RECEIVED
05 JAN 27 AM 9:37
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

( ) Profit
( ) NonProfit ( ) Amendment ( ) Merger

( ) Foreign ( ) Dissolution ( ) Mark

( ) Limited Partnership ( ) Annual Report ( ) Other
(X) Reinstatement ( ) Reservation ( ) Change of Registered Agent

( ) Certified Copy ( ) Photo Copies ( ) Certificate Under Seal

( ) Call When Ready ( ) Call If Problem ( ) After 4:30
(X) Walk In ( ) Will Wait (X) Pick Up ( ) Mail Out

Name Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier