## 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 #	P02000091690

1. Corporation Name

ANDY'S MECHANIC SHOP, INC.

Principal	Place of	Business

Mailing Address

5391 WEST 6TH AVE. HIALEAH FL 33012

5391 WEST 6TH AVE. HIALEAH FL 33012

3. New Mailing Office Address, If Applicable

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

FIL	FILED						
03 OCT 28	PH 12: 20						
SECHETARY TALLAHASSEE	OF STATE FLORIDA						

<b>HFIMS</b>	AILIAI	7)

400024215074 10/28/03--01069--031 \*\*158.75

	New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable				Date Incorporated or Qualified     To Do Business in Florida     08/22/2002					
Suite, Apt.		3 & 4	Suite, Apt. #,	etc.			5. FEI Numb			Applied For
City & State		Clorida	City & State				8 238	566067		Not Applicable
Zip 330	12	Country USA	Zip		Country		1 **	TE OF STATUS DESIRED	S8.7	75 Additional Fee required or a Certificate of Status
7. Names a	and Street Ad	ddresses of Each Officer and/	or Director (Flo	rida nonprofi	t corporati	ons must list at	least 3 directors)			
Title(s)	2	Name of Officers and/or Directors		3		et Address of Ea er and/or Direct		4	City / Sta	ate / Zip
PΥ	PORVEN,	ANDRES		5391 WE	ST 6TH A	VE.		HIALEAH FL 3301	2	
VS	PORVEN,	SIUMI		5391 WE	ST 6TH A	 \ve.		HIALEAH FL 3301	2	
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	<del></del>		<del></del>	<u> </u>						
	8. Nan	ne and Address of Current I	Registered Age	nt	<del></del> .		9. Name and	I Address of New Regi	stered /	Agent
						Name		- · · · · · · · · · · · · · · · · · · ·		
PORVEN, SIUMI 5391 WEST 6TH AVE.				-	Street Address (P.O. Box Number is Not Acceptable)					
	VH FL 3301					Suite, Apt. #, E	tc.	<del></del>		- <del></del>
						City			State	Zip Code
10. I, being	appointed th	e registered agent of the abo	ve named corpo	oration, am fa	miliar with	and accept the	obligations of Se	ction 607.0505, F.S. or 6	17.0505	i, F.S.

11.1 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:

Signature of Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REGISTERED AGENT MUST SIGN

Date

# ANDRES PORVEN 5391 WEST 6TH AVENUE HIALEAH, FLORIDA 33012 HOME: (305) 456-4754

CELL: (305) 582-4754

October 22, 2003

Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Re

Andy's Mechanic Shop, Inc.

#### Gentlemen:

I recently received a Certificate of Administrative Dissolution or Revocation which states that my corporation failed to file its 2003 annual report/uniform business report and therefore it has been dissolved or revoked. Please note, this is the first notice that I have received regarding the same. I apologize for not filing my 2003 annual report but due to stress of being a new business owner, I totally forgot. I will file the 2003 annual report as soon as possible.

Enclosed is the original application for Reinstatement. Enclosed also please find our check, made payable to the Department of State, in the amount of \$158.75 which should cover the reinstatement fees of the corporation and the Certificate of Status. Please mail the Certificate of Status to the above referenced address.

Once again, I apologize for any inconvenience this may have caused. If you have any other questions or comments, please do not hesitate to contact me.

Thank you.

Sincerely,

ANDRES PORVEN, Owner

AP/sp Enclosure