

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 NOV 14 AM 10:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000092804

1. Corporation Name

DIRT CHEAP INDUSTRIES, INC.

Principal Place of Business

1419 GLENMORE DRIVE  
CANTONMENT FL 32533

Mailing Address

1419 GLENMORE DRIVE  
CANTONMENT FL 32533



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Information  
To Do Business in Florida

09/01/2002

5. FEI Number

04-3714397

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	DOYLE II, GORDON G	1419 GLENMORE DRIVE	CANTONMENT FL 32533

200024704642  
11/14/03 01036 014 \*\*150.00

8. Name and Address of Current Registered Agent

DOYLE II, GORDON G  
1419 GLENMORE DRIVE  
CANTONMENT FL 32533

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

*Mordon M. Doyle*  
REGISTERED AGENT MUST SIGN

Date

11/10/03

11. 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:

*Mordon M. Doyle*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gordon G. Doyle  
Date

11/10/03

850-712-6056  
Daytime Phone #

CR2040 (7/03)

20f2

November 6, 2003

Florida Department of State  
Glenda E. Hood  
Secretary of State

Dear Ms. Secretary,

Enclosed please find my application for reinstatement.

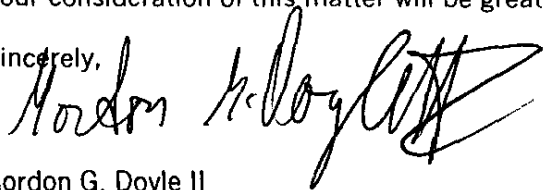
I respectfully request the abatement of penalty due to reasonable cause:

1. I did not receive a Corporate Annual Report from the State of Florida.
2. This was my first year of being a corporation and I did not know there was a corporate annual report.
3. I was not informed that I would have to file an annual report by my attorney or accountant.

Also please find enclosed my check for the annual fee.

Your consideration of this matter will be greatly appreciated.

Sincerely,



Gordon G. Doyle II