

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 # **P02000092987**

1. Corporation Name

R & C ENTERPRIZE INC.

Principal Place of Business

2918 SE. 8TH. PL.
CAPE CORAL FL 33904

Mailing Address

2918 SE. 8TH. PL.
CAPE CORAL FL 33904

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/27/2002

5. FEI Number

22-3867152

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
P	CEDENO, CINDY	2918 S.E. 8TH PL	CAPE CORAL FL 33904

900023802379
10/15/03--01016--013 **150.00

8. Name and Address of Current Registered Agent

CEDENO, CINDY
2918 SE. 8TH. PL.
CAPE CORAL FL 33904

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

SIGNATURE REQUIRED
Cindy Cedeno
REGISTERED AGENT MUST SIGN

Date **10-10-03**

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:

SIGNATURE REQUIRED
Cindy Cedeno
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-10-03

Daytime Phone #

(239) 772-3944

CR20040 (7/03)

October 10, 2003

R&C ENTERPRIZE INC.
2918 S.E. 8TH PL.
CAPE CORAL, FL, 33904

RE: DOCUMENT NUMBER P02000092987

To Whom It May Concern:

IM WRITING THIS LETTER BECAUSE WE HAVE NOT BEEN RECEIVING OUR MAIL AT OUR PHYSICAL ADDRESS. FOR SOME REASON SOME OF OUR MAIL HAS BEEN DELIVERED TO 2918 S.E. 8TH AVE OR S.E. 8TH ST.. OUR CORRECT ADDRESS IS 2918 S.E. 8TH PL., I HAVE SPOKEN TO THE PEOPLE AT MY NEAREST POST OFFICE ABOUT THIS MATTER AND IT SEEMS THAT THE MAIL MAN WHO HAD OUR ROUT HAS BEEN MESSING UP FOR SOME TIME. AS SOON AS WE FOUND OUT ABOUT THIS LETTER WE HAVE TAKEN THIS MATTER SERIOUSLY. THIS IS ONE OF THE REASON THAT WE HAVE NOT RECEIVED ANY NOTICES FROM THE DIVISION OF CORP., (UBR NOTICES) IN REGARDS TO THIS MATTER. PLEASE PARDON ANY DELAY THAT MAY HAVE CAUSED THIS CONFUSION. THANK YOU FOR YOUR TIME AND CONSIDERATION.

Thank you,
Cindy Cedeno
CINDY CEDENO