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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUN -8 AM 8:00

DOCUMENT # P02000093174

1. Corporation Name

RAYMOND ABBOTT ENTERPRISES, INC.

REINSTATEMENT 03-04
MRD

500037757515
06/08/04--01011--026 **308.75

2. Principal Office Address

16706 RISING STAR DR.

Suite, Apt. #, etc.

City & State

CLERMONT, FL

Zip

34711

Country

3. Mailing Office Address

16706 RISING STAR DR.

Suite, Apt. #, etc.

City & State

CLERMONT, FL

Zip

34711

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

08-26-2002

5. FEI Number

51-0427120

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

RAYMOND ABBOTT

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

16706 RISING STAR DRIVE

Suite, Apt. #, Etc.

City

CLERMONT

State

FL

Zip Code

34711

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

Date 6.4.04

REGISTERED AGENT MUST SIGN

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
PD	RAYMOND ABBOTT	16706 RISING STAR DR.	CLERMONT, FL 34711

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6.4.04

Daytime Phone #

CR2E081 (01/04)

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RAYMOND ABBOTT ENTERPRISES, INC.

16706 Rising Star Drive
Clermont, FL 34711

June 3, 2004

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

We are remitting with the enclosed Corporation Reinstatement Form a check in the amount of \$308.75, representing the filing fees due for 2003 & 2004 of \$150.00 each year and \$8.75 for a Certificate of Status.

Please abate all late filing penalties, as we never received the 2003 or 2004 Uniform Business Report (UBR) from your department and were not aware of administrative dissolution until examining the Division of Corporations website.

Sincerely,



Raymond Abbott
President/Director
Raymond Abbott Enterprises, Inc.