

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1092

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000096043

1. Corporation Name

MARTY AUTO SALES, INC.

Principal Place of Business

1067 SHADICK DRIVE
SUITE F
ORANGE CITY FL 32763

Mailing Address

1067 SHADICK DRIVE
SUITE F
ORANGE CITY FL 32763

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

522377223

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT



02-10-03 90125 005 \$150.00 03

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PTD	VALENTIN, MOISES	897 HUGO COURT	DELTONA FL 32738
VSD	VALENTIN, DEMARYS	897 HUGO COURT	DELTONA FL 32738

8. Name and Address of Current Registered Agent

VALENTIN, DAMARYS
897 HUGO COURT
DELTONA FL 32738

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

Damarys Valentini

REGISTERED AGENT MUST SIGN

Date

11-30-03

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:

Damarys Valentini

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-30-03

Daytime Phone #

CH2E040 (7/03)

2 of 2

Marty Auto Sales, Inc.
1067 Shadick Dr.
Orange City, FL 32763

386-917-0700

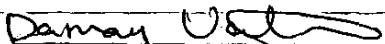
October 30, 2003

Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314-6327

On February 6, 2003, I send a check in the amount of \$150.00 for the annual UBR, which was cashed in. The report was returned on February 11, 2003 due to the fact that the FEIN was incorrect. I immediately returned it with the correction. Since then I have not received any other equerries until this notice of dissolution. Also on April 23, 2003, I send in a check in the amount of \$8.75 for a certificate of status which we never received.

Please waive the reinstatement fee and reinstate the corporation.

Thank You,



Demarys Valentin
President