

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1012

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
06 FEB -3 PM 2:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P02000099524

1. Corporation Name

Central Florida Custom Painting, Inc

REINSTATEMENT 03-06

To Do Business in Florida (12/05) FEB 06 2006

2. Principal Office Address

600 Thacker Offices

Suite, Apt. #, etc.

23C

City & State

Kissimmee, FL

Zip

34741

Country

Osceola

3. Mailing Office Address

600 Thacker Offices

Suite, Apt. #, etc.

PO Box 2160

City & State

Kissimmee Florida

Zip

34741

Country

Osceola

4. Date Incorporated or Qualified  
To Do Business in Florida

September 13, 2002

5. FFL Number

55-0796688

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

Anthony J Pepe III

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

3513 St Kitts Court

Suite, Apt. #, etc.

Apt 2208

City

Kissimmee

State

FL

Zip Code

34741-2657

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

*Anthony J Pepe III*

REGISTERED AGENT MUST SIGN

Date

1-31-06

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
P	Anthony J Pepe III	600Thacker Offices, 23C	Kissimmee, FL 34741

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 contained in Chapter 119, 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:

*Anthony J Pepe III*

Anthony Pepe III

01/31/06

407-343-7775

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ps 2/12

Central Florida Custom Painting, Inc  
600 Thacker offices  
PO Box 2160  
Kissimmee, Florida 34741  
407-343-7775

January 31, 2006

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 34314

RE: Document # P02000099524

To whom it may concern,

I, Anthony J Pepe III, President of Central Florida Custom Painting, Inc did not receive an annual report notice in 2003. In 2004 my community suffered a natural disaster due to the ~~relentless hurricane season~~ that only escalated in 2005. Many homes and businesses in the area are still under reconstruction. Although I was fortunate enough to salvage and relocate my office after several temporary moves, I know not all my mail was recovered. Therefore I am requesting that the reinstatement fee be waived for the previous years.

I have enclosed a check for \$750.00 for the minimum fee amount due. If this is an overpayment please make refund check payable to Central Florida Custom Painting, Inc and mail to:

600 Thacker offices  
PO Box 2160  
Kissimmee, Florida 34741

Thank you in advance for your consideration and time regarding this matter. If you have any questions please contact my bookkeeper Celeste Barnes at 407-343-7775 for assistance.

Sincerely,



Anthony J Pepe III  
President  
CFCP