

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR 16 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000105800**

1. Corporation Name

PEE GEE Enterprises

REINSTATEMENT 03-04

2. Principal Office Address

18825 Old Shady Hills Rd
Suite, Apt. #, etc.

Spring Hill, FLA
City & State

Spring Hill, FLA
Zip

34610

Country

PASCO

3. Mailing Office Address

18825 Old Shady Hills Rd
Suite, Apt. #, etc.

City & State

Spring Hill, FLA
Zip

34610

Country

PASCO

4. Date Incorporated or Qualified
To Do Business in Florida

10-01-02

5. FEI Number

36-4510240

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

JOANNE PANTALEO

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

18825 Old Shady Hills Rd

Suite, Apt. #, Etc.

City

Spring Hill

State

FL

Zip Code

34610

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

Joanne Pantaleo
REGISTERED AGENT MUST SIGN

Date

3-15-2004

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
pres	JOANNE PANTALEO	18825 Old Shady Hills Rd	Spring Hill, FLA 34610

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:

Joanne Pantaleo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-2004
Date

727-857-0041
Daytime Phone #

CR2E081 (10/02)

March 11, 2004

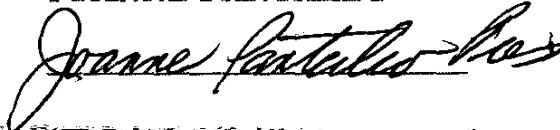
TO WHOM IT MAY CONCERN:

I AM WRITING TO SEE IF YOU WILL BE ABLE TO WAIVE THE FEES FOR REINSTATING MY CORPORATION PEE GEE ENTERPRISES INC. UNKNOWN TO ME UNTIL I WENT TO RENEW MY DEALERS LICENSE I WAS TOLD MY CORPORATION WAS INACTIVE. I PAID MY SALES TAX AND FILED MY CORPORATE RETURN. I HAD NO KNOWLEDGE OF THIS. WHEN I CALLED I WAS TOLD THE NOTICE WAS MAILED TO BROOKLYN NEW YORK TO THE LAWYER THAT FORMED THE CORPORATION. I HOPE YOU CAN HELP ME I AM ENCLOSING MY CHECK FOR \$300.00. I HOPE THIS WILL REINSTATE IT. IF I DO OWE ANY THING ELSE PLEASE NOTIFY ME

PEE GEE ENTERPRISES INC.
18825 OLD SHADY HILLS ROAD
SPRING HILL, FLORIDA 34610

SINCERLY YOURS.

JOANNE PANTALEO

A handwritten signature in cursive script, appearing to read "Joanne Pantaleo".