

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

03 OCT 24 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03

700024059457
10/24/03--01007--020 **150.00

DOCUMENT # P02000108471

1. Corporation Name

EL SALVADOR LANDSCAPING CORP.

Principal Place of Business

16711 SW 133RD COURT
NARANJA FL 33032

Mailing Address

16711 SW 133RD COURT
NARANJA FL 33032

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

2. New Principal Office Address, If Applicable

~~26711 SW 133rd Court~~
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

~~Naranja, Florida~~
Zip Country

City & State

~~Florida 33032~~
Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/07/2002

5. FEI Number

~~82-0568155~~

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
PD	NUNEZ, HUGO	26711 SW 133rd Ct	NARANJA FL 33032
VD	CONTRERAS, CRISANTA	26711 SW 133rd Ct	NARANJA FL 33032

8. Name and Address of Current Registered Agent

NUNEZ, HUGO
16711 SW 133RD COURT
NARANJA FL 33032

9. Name and Address of New Registered Agent

Name

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

26711 SW 133rd Court

Suite, Apt. #, Etc.

City

Naranja

State

FL

Zip Code

33032

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

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/10/03

Daytime Phone #

CR2E040 (7/03)

October 17, 2003

To:

Florida Department of Revenues

Division of Corporations

Tallahassee, Florida 32314

Dear Mr. or Mrs.

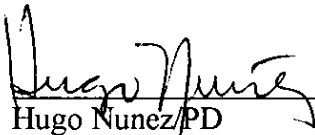
Attached you will find a Check for \$150 and application for reinstatement of El Salvador Landscaping Corp., the reason is because I never received the annual report when I suppose to.

The address was wrong by one number and I got this form because the mailman asks me if the letter belong to me.

Now I asking you to waive the penalties for filling late, since this is not our fault, please update our address correctly.

If you need more information, feel free to call us at anytime.

Sincerely,



Hugo Nunez/PD

305-247-6603