

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 NOV 28 AM 8:39

DOCUMENT # 702000120943

1. Corporation Name

Denis Fauteux, Inc.

REINSTATEMENT

05-06

2. Principal Office Address

1861 SW MacKenzie St

Suite, Apt. #, etc.

City & State

Port St Lucie, FL

Zip

34953

Country

US

3. Mailing Office Address

1861 SW MacKenzie St

Suite, Apt. #, etc.

City & State

Port St Lucie, FL

Zip

34953

Country

US

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

11/08/2002

5. FEI Number

06-1657914

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

Denis Fauteux

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

1861 SW MacKenzie St

Suite, Apt. #, Etc.

City

Port St Lucie

State

FL

Zip Code

34953

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

*Denis Fauteux*

REGISTERED AGENT MUST SIGN

Date Nov. 7. 2006

**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
PSTD	Denis Fauteux	1861 SW MacKenzie St	Port St Lucie, FL 34953

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:

*Denis Fauteux*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nov. 7. 2006

Date

9549074499

Daytime Phone #

2 of 2

November 7, 2006

Florida Department of State  
Secretary of State  
Division of Corporation

RE: Denis Fauteux, Inc.  
P02000120943

To Whom It May Concern:

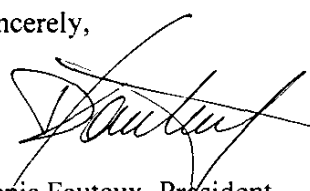
I am writing on behalf of my corporation, Denis Fauteux, Inc. in attempt to reinstate the corporate status of my company with the State of Florida.

Attached, please find a completed Corporation Reinstatement form to execute the reinstatement along with a check for \$300 for the normal filing fees required for 2005 and 2006.

I would like to request that the penalties be abated as I did not receive any notifications requesting the original filing for 2005 nor the notice of intent to administratively dissolve. My attorney happened to notice the status of "inactive" when looking to update the corporate books and notified me of the situation.

Please accept the Corporation Reinstatement along with the payment of \$300 to reactivate my corporate standings.

Sincerely,

  
Denis Fauteux, President  
Denis Fauteux, Inc.