

112

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAR 24 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PO3000056974**

1. Corporation Name

Tucanes Finish Drywall, Inc.

2. Principal Office Address

13621 Eagle Ridge Dr

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Myers

City & State

FL

Zip

33912

Country

USA

Zip

Country

REINSTATEMENT

04-05

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

02-0692520

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

WALTER HERNANDEZ FLORES

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

13621 Eagle Ridge Dr.

Suite, Apt. #, Etc.

#1526

City

Fort Myers

State

FL

Zip Code

33912

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

Date

REGISTERED AGENT MUST SIGN

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	Walter Hernandez Flores	13621 Eagle Ridge Dr. Suite 1526	Fort Myers FL 33912
VP.	Norma Arevalo	13621 Eagle Ridge Dr.	Fort Myers FL 33912

400049646374

04/01/05--01007--010 **300.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/24/05 (239) 289-9433

3/3/aw

Dear Sir/Madam.

My name is Walter Hernandez Flores owner of Tucanes Finish Drywall Inc.

The reason of writing is to inform that I never received

my notices for payment

of Annual Report. I was

not aware of this payment

Please accept my apologize.

I'm sending a check for

2004-2005

X 