


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P03000059054</b> 1. Entity Name <b>MARQUESA FENCE, INC.</b>					
Principal Place of Business <b>4721 SILKRUN COURT PLANT CITY, FL 33567</b>			Mailing Address <b>4721 SILKRUN COURT PLANT CITY, FL 33567</b>		
2. Principal Place of Business <b>5212 State Road 60</b>		3. Mailing Address <b>←</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>Dover FL</b>		City & State 		4. FEI Number <b>56-2353668</b>	
Zip <b>33527</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>DANDAR, KENNAN G. ESQ. 4715 NORTH WESTSHORE BLVD. SUITE 750 TAMPA, FL 33607</b>				7. Name and Address of New Registered Agent <b>550 N Red St Suite 106 TAMPA FL 33609</b>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Dandar</i></u> <span style="float: right;">11-04-05</span> <small>Signature, typewritten or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE</small>					
<b>FILE NOW!!! FEE IS \$750.00</b> <b>After January 1, 2006, Fee will be \$900.00</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD RAMIREZ, FRANCISCA O 4721 SILKRUN COURT PLANT CITY, FL 33567		TITLE NAME STREET ADDRESS CITY - ST - ZIP	000061448280 11/15/05 01072 013 ***750.00	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Dandar</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					

FILED

05 DEC 27 AM 8:54

SECRET  
TALLAHASSEE

10212005 REIN-P CR2E098 (6/04)

Applied For  
Not Applicable

FL Zip Code

DATE

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