

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03000085837

1. Corporation Name

PRO ROOFING & METAL CO., INC.
185 WISTERIA AVE., N.W.
PALM BAY, FL 32907

2. Principal Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

FILED

04 OCT 12 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400041818694

10/12/04--01044--011 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

8/1/03

5. FEI Number

02-0702191

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

CHARLES L. BRADY

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

185 WISTERIA AVE., N.W.

Suite, Apt. #, Etc.

City

PALM BAY

State

FL

Zip Code

32907

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

Charles L. Brady
REGISTERED AGENT MUST SIGN

Date 10-7-04

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
PTD	CHARLES L. BRADY	185 WISTERIA AVE., N.W.	PALMBAY, FL 32907

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:

Charles L. Brady
CHARLES L. BRADY, PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/07/04

Date

Daytime Phone #

CR2E081 (07/04)

To Whom It May Concern:

I would like to respectfully request an abatement of the late filing penalties associated with the enclosed reinstatement. This is a first year corporation & I never received the original notification of the Annual Report filing requirement. When I did receive the late filing notice I put it to the side to discuss with my accountant. I am a roofing contractor in Brevard County which has been declared a federal disaster area. Since Hurricane Charlie hit in August I have literally been working around the clock, and as I'm sure you're aware, it has only gotten worse from there. If that wasn't bad enough, after Hurricane Jeanne hit, my wife was fired from her job because we couldn't find child care while the schools were closed to allow her to return to work. I truly appreciate any consideration you can give me on this issue.

Sincerely,

Charles L. Brady, President