

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 DEC 20 AM 10:13

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO3000095882

1. Corporation Name

OVH ENTERPRISES INC

200052280573
12/30/05--01007--005 **150.00

10/26/04 01053 017 \$150.00

CR2E081 (8/05) 04-05

2. Principal Office Address

5 Cedardale ct

3. Mailing Office Address

5 Cedardale ct

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm Coast FL

City & State

Palm Coast FL

Zip

32137

Country

USA

Zip

32137

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

09-03-2003

5. FEI Number

11-3703497

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

Campora Henry M

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

5 Cedardale ct

Suite, Apt. #, Etc.

City

Palm Coast FL

State

FL

Zip Code

32137

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

Henry M Campora

REGISTERED AGENT MUST SIGN

Date

DEC 16 2005

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 |
|--------|--------------------------------------|---|--------------------|
| pres | Campora Henry M | 5 Cedardale ct | Palm Coast FL32137 |
| | | | |
| | | <i>R12/21</i> | |
| | | | |
| | | | |
| | | | |

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:

Henry M Campora

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEC 16 2005

Date

386-447-0024

Daytime Phone #

OVH ENTERPRISES INC
5 CEDARDALE CT
PALM COAST FL
32137

To Whom It My Concern

I AM WRITING CONCERNING MY CORPORATION THAT IS IN DISSOLUTION
BECAUSE I DID NOT RECEIVE ANY REJECTION LETTER FROM FLA DEPT DATED 10-28-
2004
SO I AM ASKING YOU TO PLEASE WAVE THE \$600.00 FEE FOR THE PENALTIES. I AM
ENCLOSING A CHECK FOR \$150.00 DOLLARS AND THEN I WILL SUBMIT ADDITIONAL
\$150.00 IN JANUARY 2006 FOR THE NEW YEAR . PLEASE TAKE THIS LETTER INTO
CONSIDERATION ALONG WITH MY REINSTATEMENT FORM ALSO MY CORRECT
ZIP CODE IS 32137

THANK YOU

Henry M. Canora

DEC 16 2005