

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 25 PM 4: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000119056

1. Corporation Name

RAY SMITH PLUMBING, INC.

2. Principal Office Address

206 FORTNER AVE.

Suite, Apt. #, etc.

City & State

LAKELAND, FL

Zip

33801

Country

US

3. Mailing Office Address

206 FORTNER AVE.

Suite, Apt. #, etc.

City & State

LAKELAND, FL

Zip

33801

Country

US

REINSTATEMENT ON

4. Date Incorporated or Qualified
To Do Business in Florida

10/22/2003

5. FEI Number

59-0910896

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ERNEST R SMITH

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

206 FORTNER AVE.

Suite, Apt. #, Etc.

City

LAKELAND

State
FL

Zip Code
33801

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	ERNEST R SMITH	206 FORTNER AVE	LAKELAND, FL 33801

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:

Ernest R. Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-21-04

Date

863-682-5151

Daytime Phone #

CR2E081 (01/04)

RAY SMITH PLUMBING, INC.
206 FORTNER AVE.
LAKELAND, FL 33801

October 20, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: 2004 Uniform Business Report Reinstatement

Gentlemen:

In reference to the 2004 Uniform Business Report please find enclosed a check for reinstatement fee in the amount of \$150.00. Please be advised that we never received the original report or the subsequent notices.

Please send me confirmation of this reinstatement. Thank you for your assistance.

Sincerely,



Ernest R. Smith,
President