

# 2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000128151

1. Entity Name  
PUNCHOUT MAN INC.



APPROVED  
AND  
FILED

DEC 14 PM 5:07

Principal Place of Business  
19224 MURCOTT DRIVE EAST  
FORT MYERS, FL 33912

Mailing Address  
19224 MURCOTT DRIVE EAST  
FORT MYERS, FL 33912

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT



11012004 REIN-P CR2E098 (6/04) 04 DEC 14 PM 5:07

2. Principal Place of Business  
19224 Murcott Dr East  
Suite, Apt. #, etc.

3. Mailing Address  
19224 Murcott Dr East  
Suite, Apt. #, etc.

City & State  
Ft Myers FL  
Zip 33912  
Country Lee

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Ft Myers FL  
Zip 33912  
Country Lee

4. FEI Number  
450529147  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

HAYEK, MICHAEL D  
19224 MURCOTT DRIVE EAST  
FORT MYERS, FL 33912

## 7. Name and Address of New Registered Agent

Name  
Michael Hayek  
Street Address (P.O. Box Number is Not Acceptable)  
19224 Murcott Dr East  
City Ft Myers FL Zip Code 33912

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  
Michael D Hayek  
Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12-2-04  
DATE

**FILE NOW!!! FEE IS \$750.00**  
**After January 1, 2005, Fee will be \$900.00**

## 10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HAYEK, MICHAEL D 19224 MURCOTT DRIVE EAST FORT MYERS, FL 33912	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

900043405449  
12/14/04--01048--009 \*\*150.00

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: Michael D Hayek  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-2-04 239 470 3623  
Date Daytime Phone #

\* Attachment - please return with document \* 2/2  
PS 282

**Punchout Man Inc  
Michael Hayek  
19224 Murcott Drive E.  
Ft. Myers, FL. 33912**

**Corporations Reinstatement Fee**

**This was my first year of incorporation**

**With the four storms and the work after word**

**I forgot to file my 2004 Annual report.**

**There was so much work and stress at that time**

**I forgot. I got the Notice 10 / 23 / 04**

**Please review and let me know what I need to do**

**I hope you will consider Waving the Fees**

Copy