

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

07 FEB 19 PM 3:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **PO3000128519**

1. Corporation Name

**Vero Beach Painting n Sons, Inc.**

000089571100  
02/27/07--01010--028 \*\*600.00

2. Principal Office Address - No P.O. Box #

**1371 3rd Court**

Suite, Apt. #, etc.

**House**

City & State

**Vero Beach Fla**

Zip

**32960**

Country

**Indian River**

3. Mailing Office Address

**SAME**

Suite, Apt. #, etc.

**House**

City & State

**Vero Beach Fla**

Zip

**32960**

Country

**Indian River**

**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

**10/5/03**

5. FEI Number

**32-0095-081**

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

**Horace Alfonso Jr.**

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

**1371 3rd Court**

Suite, Apt. #, Etc.

**House**

City

**Vero Beach Fla**

State

**FL**

Zip Code

**32960**

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

**Horace Alfonso Jr.**

Date

**7/15/07**

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
President	Horace Alfonso	1371 3rd Court	Vero Beach Fla 32960
Secretary	Curtis Alfonso	1371 3rd Court	Vero Beach Fla 32960
Treasurer	Jamie Alfonso	1371 3rd Court	Vero Beach Fla 32960

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 contained in Chapter 119, 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:

**Horace Alfonso Jr.**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2/15/07**

Date

**772-473-4705**

Daytime Phone #