

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 OCT 11 PM 1:27

SECRETARY OF STATE
FALL 2005

DOCUMENT # p03000139842

1. Corporation Name

J.A. DRYWALL & FINISH INC

2. Principal Office Address

7622 CASSINO AVE

Suite, Apt. #, etc.

City & State

ORLANDO FLORIDA

Zip

32819

Country

ORANGE

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

11/25/2003

5. FEI Number

20-0422188

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (8/05)

7. Name and Address of Current Registered Agent

Name

JULIO AMAYA

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

7622 CASSINO AVE

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32819

600060459206

10/11/05-01005-005 **300.00

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

Julio Amaya

REGISTERED AGENT MUST SIGN

Date

10/3/05

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	JULIO AMAYA	7622 CASSINO AVE	ORLANDO FL 32819
VP	SANTOS J SEGOVIA	2200 SANTA LUCIA ST	KISSIMMEE FL 34743

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:

Julio Amaya
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/3/05

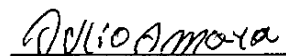
Daytime Phone #

October 3, 2005

To Whom It May Concern:

I DID NOT FILE MY ANNUAL REPORT DUE TO THE FACT THAT I NEVER RECEIVED NOTIFICATION VIA MAIL; PLEASE, I ASK FOR A WAIVE OF THE PENALTY FOR THIS YEAR.

THANK YOU.



JULIO AMAYA (PRESIDENT)