

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 OCT 10 PM 3:46

DOCUMENT # P04066054070

1. Corporation Name

Vogue Painting

REINSTATEMENT 05-06

2. Principal Office Address

18927 Frost DR

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 516

Suite, Apt. #, etc.

10/05/06 01025 004 \$ 300.⁰⁰
CR2E081 (12/05)

City & State

Orlando FL

City & State

Christmas, FL

Zip

32820

Country

U.S.A.

Zip

30709

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

10-10-06

5. FEI Number

200927870

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

William T Cuddy

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

18927 Frost DR

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32820

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

William T Cuddy

REGISTERED AGENT MUST SIGN

Date 10-10-06

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	William T Cuddy	18927 Frost DR	Orlando, FL 32820
V.P.	Robin L Cuddy	18927 Frost DR	Orlando, FL 32820

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:

William T Cuddy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-10-06

Date

407-568-4181

Daytime Phone #

Robin Cuddy

10-10-06

407-568-4181

To Whom it may Concern,

10.10.06 2/2

We William Cuddy and Robin Cuddy
of VOGUE Painting are writing this
letter to let who ever it concerns that
we have not Received any kind of
papers or forms to tell us to
Reinstate Vogue Painting, Inc. in 2005
nor in 2006. the fee's was to be waived
and I sent 300.00 for 2005 + 2006 that
was deposited by Dept of State.

Thank you,
Robin Cuddy
William Cuddy

P.S please call if you have any
Questions that would cause this to
be denied. 407-568-4181 Thanks Again