

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 DEC 24 PM 1:41

REINSTATEMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

P04000118468

1. Corporation Name

D & F LANDSCAPE SERVICE, INC.

REINSTATEMENT 06-07
CR2E081 (1/07)

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

2557 INIS BROOK RD

3. Mailing Office Address

2557 INIS BROOK RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

City & State

WEST PALM BEACH, FL

Zip

33407

Country

Zip

33407

Country

4. Date Incorporated or Qualified
To Do Business in Florida

8/16/2004

5. FEI Number

201515126

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

MERILES FENELUS

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

2557 INIS BROOK RD

Suite, Apt. #, Etc.

City

WEST PALM BEACH

State

FL

Zip Code

33407

☐ 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

Meriles Fenelus

REGISTERED AGENT MUST SIGN

Date 12-19-07

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 | MERILES FENELUS | 2557 INIS BROOK RD | WEST PALM BCH FL33407 |
| VP | JEAN RICOT FENELUS | 5240 FOXTRACE | WEST PALM BCH FL33407 |
| F | OSNEL FENE | 2557 INIS BROOK RD | WEST PALM BCH FL33407 |
| | <u>Phyllis</u> | | |
| | | | |
| | | | |

500113349635
12/21/07-01028--025 **900.00

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:

MERILES FENELUS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-19-07

Daytime Phone #