

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

2009 AUG 12 PM 8:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P07000098494

1. Corporation Name

L & P Plumbing Services Inc

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

10687 Lake Oak Way

Suite, Apt. #, etc.

City & State

Boca Raton - FL

Zip

33498

Country

Palm Beach

3. Mailing Office Address

10687 Lake Oak Way

Suite, Apt. #, etc.

City & State

Boca Raton - FL

Zip

33498

Country

Palm Beach

4. Date Incorporated or Qualified  
To Do Business in Florida

09-04-2007

5. FEI Number  
26 - 0848428

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

Ramaswamy Laxman

Street Address (P.O. Box Number is Not Acceptable)  
9911 Liberty Road

Suite, Apt. #, Etc.

City

Boca Raton

State

FL

Zip Code

33434

☐ 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

*Ramaswamy Laxman*

REGISTERED AGENT MUST SIGN

Date August 5, 2009

**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
D	Bensoussan, Pierre Y	10687 Lake Oak Way	Boca Raton - FL - 33498

REINSTATEMENT

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:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 5, 2009 561-542-0322

Date

Daytime Phone #

B. Mitchell AUG 12 2009

20f2

July 11, 2009

From:  
Pierre Y Bensoussan  
10687 L & P Plumbing Services Inc  
Boca Raton - FL - 33498

To:  
Department of State  
Division of Corporations  
P O Box 6327  
Tallahassee - FL - 32314

**Ref:** L & P Plumbing Services Inc  
Document # P0700009494

**Sub:** Reinstatement

Please find enclosed the form for Reinstatement duly filled in.

The company was administratively dissolved on the premise that Annual Report fees for the year 2008 was not paid. This is not correct. I have sent the payment of \$ 150.00 by check # 1008 dated April 29, 2008 which was duly processed by my bank. See copy of check attached.

As such there no default and the company should have been kept active.

However, you did not sent a notice for Annual Report for 2009, based on the status in your records.

Through this letter I request that the payment made for 2008 be duly recorded and the company made active retrospectively.

I further request that the fees for 2009 Annual Report of \$ 150.00 plus fees for Status Report of \$ 8.75 be now accepted and the company made active accordingly.

I would appreciate your immediate attention and action.

Thank you



Pierre Bensoussan, Director.