

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 SEP 22 AM 9:33

DOCUMENT # P930.00004603

1. Corporation Name

POLY-DECK SYSTEMS INC

W04-34111

2. Principal Office Address

10411 N.W. 19 PLACE

Suite, Apt. #, etc.

3. Mailing Office Address

10411 N.W. 19 PLACE

Suite, Apt. #, etc.

City & State

PEMBROKE PINES

City & State

PEMBROKE PINES FL

Zip

33026

Country

FLORIDA

Zip

33026

Country

FLORIDA

94-04  
**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

1993  
1994

5. FEI Number

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

KENNETH PERRY

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

10411 N.W. 19 PLACE

Suite, Apt. #, Etc.

800041260438

09/22/04--01053--009 \*\*1815.00

City

PEMBROKE PINES

State

FL

Zip Code

33026

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

K. Perry

Date

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
Pres	KENNETH PERRY	10411 N.W. 19 PLACE	PEMBROKE P. FL 33026

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:

K. Perry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SEPT 8 2004 954.432-

Date

Daytime Phone # 6543

9/22  
00

— please Do Not Remove —

212

September 8 2004

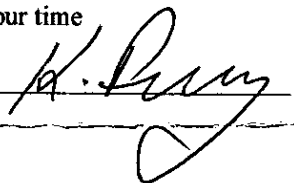
To Whom It My Concern :

In 1993 I Ken Perry formed a Fla Corporation Poly-Deck Systems Inc. at that time I lived in Dade County 20531 N.W. 20 Court 33056 after Andrew storm moved to Pembroke Pines in Broward co. I never recieved a notice in 1994 or since i was told in writing this letter fees would be waived.

I was told to send a check for \$1,650.00

thank you for your time

Kenneth Perry

A handwritten signature in cursive script, appearing to read "K. Perry", is written over a horizontal line.