

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P94000012031

1. Corporation Name

PIONEER WOODWORKS, INC.

Principal Place of Business

1838 TIGERTAIL BLVD
DANIA FL 33004
US

Mailing Address

1838 TIGERTAIL BLVD
DANIA FL 33004
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

1932
Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

1932
Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/09/1994

5. FEI Number

65-0468924

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	SMYTH, PAUL	1838 TIGERTAIL BLVD 1932	DANIA FL

000004687660--3
-11/19/01--01066--017
****150.00 ****150.00

8. Name and Address of Current Registered Agent

SMYTH, PAUL
1838 TIGERTAIL BLVD
DANIA FL 33004

9. Name and Address of New Registered Agent

Name

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

1932
Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-1901

2nd 2
Oct. 19, 2001

Please note. Our address
has changed as of Jan 2001
I have never received any
notice until Oct. 2001.
When a neighbor brought
me this notice.

Also for your records
Please change address on file
to 1932.

Enclosed please find a
Renewal CK for 150.00 for
2001.

Thank You
Paul Lyle