

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAR 25 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000023498**

1. Corporation Name

**FIRST-STOP LANDSCAPING AND LAWN
MANAGEMENT, INC.**

2. Principal Office Address

5263 WOODLAND DRIVE

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL.

Zip

33484

Country

USA

3. Mailing Office Address

5263 WOODLAND DRIVE

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL.

Zip

33484

Country

U.S.A

300049891973

04/05/05--01028--009 **900.00

4. Date Incorporated or Qualified
To Do Business in Florida

3/23/1994

5. FEI Number

65-0496164

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

JOHN F. ELLIS

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

5263 WOODLAND DRIVE

Suite, Apt. #, Etc.

City

DELRAY BEACH

State

FL

Zip Code

33484

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

John F. Ellis

REGISTERED AGENT MUST SIGN

Date **3/22/05**

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
president	John F. Ellis	5263 Woodland DR	Delray B. FL 33484
VICE PRESIDENT	ADA RIVERA-ELLIS	5263 WOODLAND DR.	DELRAY BEACH, FL. 33484

REINSTATEMENT 06-05

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: **John F. Ellis**

SIGNATURE:

John F. Ellis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

president 3/22/05 (564) 6370003

Date

Daytime Phone #

CR2E081 (01/05)

5263 Woodland Drive
Delray Beach, Fl. 33484
March 23, 2005

Department OF State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

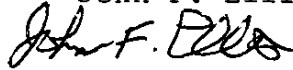
Document #P94000023498

Gentlemen:

I did not receive the correction letter by May 15th
2000, and feel the reinstatement fee should be waived.
Your prompt attention to this matter is appreciated.

Yours Truly,

John F. Ellis



P.S. We moved from the Fort Lauderdale,
To Palm Beach during that time frame.