

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P94000053673**

1. Corporation Name

J & J CUSTOM PAINTING, INC.

Principal Place of Business

1029 B HEGLE PARK RD. NE
BRADENTON FL 34202

Mailing Address

1029 B HEGLE PARK RD. NE
BRADENTON FL 34202

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

2. New Principal Office Address, If Applicable

1027 B. Hegle Park Rd N.E.
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

N.E.
Suite, Apt. #, etc.

City & State

Bradenton FL

City & State

Zip

34202

Country

USA

Zip

Country

FILED

96 NOV 15 AM 7:56

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

*MWB
11-20-96*

REINSTATEMENT 1996

4. Date Incorporated or Qualified
To Do Business in Florida

07/18/1994

5. FEI Number

65-0509118

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	DOWLING, JOSEPH H	1029 B HEGLE PARK RD. NE	BRADENTON FL 34202

**200002010802--1
-11/21/96--01023--017
\$375.00 \$375.00**

8. Name and Address of Current Registered Agent

DOWLING, JOSEPH H
1029 B HEGLE PARK RD. NE
BRADENTON FL 34202

9. Name and Address of New Registered Agent

Name

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

1027 B. Hegle Park Rd N.E.

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

Joseph H Dowling
REGISTERED AGENT MUST SIGN

Date

11/8/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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)(f), 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:

S. Joseph H Dowling
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/8/96 941-748-5656