

APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

00 NOV -3 AM 10:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000080222

1. Corporation Name

MARCO BARQUERO PAINTING, INC.

Principal Place of Business

Mailing Address

235 PRINCETON DR  
LAKE WORTH FL 33460  
US

235 FORDHAM DRIVE  
LAKE WORTH FL 33460



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

10/31/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

125 Beverly Rd.

125 Beverly Rd.

West Palm Beach Fla

West Palm Beach Fla.

33405

USA.

33405

USA

5. FEI Number

65-0510906

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
P	BARQUERO, MARCO	125 BEVERLY RD	WPB FL 33405
VP	BARQUERO, GABRIEL	201 VANDERBILT	LAKE WORTH FL 33460
T	BARBOSA, DOUGLAS	401 EXECUTIVE CNTR DR, #105	WEST PALM BEACH FL 33401

800003485608--0  
-12/05/00--01013--008  
\*\*\*\*150.00 \*\*\*\*150.00

DO UBR

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BARQUERO, MARCO  
235 PRINCETON DR  
LAKE WORTH FL 33460

Name

SAME

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

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

*Marquero*

REGISTERED AGENT MUST SIGN

Date 10-25-00

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

*Marquero*

10-25-00 (561) 818 66 11  
Date Daytime Phone #

CR2EG40 (8/00)

November 1, 2000

To Whom It May Concern:

I spoke on the phone with a gentleman at the Department of State after receiving a letter dissolving my corporation. I explained that 3 years earlier I changed the mailing address of the corporation and it was being sent to my new address. For some reason this year it was sent to the old address. I once again put the new address on my application for reinstatement and have enclosed a check for \$150.00 as the gentleman instructed me to do. Thank you for your cooperation.

Sincerely,

  
Marco Barquero