PLEASE READ	ALL INSTRUCTIONS	BEFORE C	OMPLET	ING THIS FO	ORM Whis	- 1410	
APPLICATION FOR REINSTATEMENT	FLORID TMP						
DOCUMENT # P94000085924 (6)			98 DEC -7 AM 11: 08				
1. Corporation Name  Herminio Morales Excavating Service, Inc.							
-			MALLAHASSEE, FLÖRÍÐA				
Principal Place of Business Mailing Address  2112 41st Terrace SW 2112 41st Terrace SW  Naples, FL 34116 Naples, FL 34116							
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  5.00 5th Avenue South  5.00 5th Avenue South			Date incorporated or Qualified     To Do Business in Florida				
Suite, Apt. #, etc. # 5 2 4	Suite, Apt. #, etc. # 5.2.4	-	11/22/94 5. FEI Number Applied For				
City & State Naples, FL	City & State Naples, FL	.83	6	5-0554000		Not Applicable	
Zip Country 34102 US	Zip   Countr   34102   US	•		RTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
7. Names and Street Addresses of Each Officer and/	Str	reet Address of Each		· · · · · · · · · · · · · · · · · · ·	<u> </u>	.95	
Itle(s) and/or Directors Off 3 (Do NOT Us		fficer and/or Director ise Post Office Box N	umbers)	4	City / State / Zip		
PSTVP Morales, Herminio	t Terrace	SW	Naples,	FL 34	116		
		<del></del>				<del></del>	
		Paral .		000002	/980103 0.00 ***		
						47 A	
8. Name and Address of Current F	Registered Agent	Name	9. Name and A	ddress of New Regi	stered Agent		
Shumake, Jim DWill			iam C. Erickson O. Box Number is Not Acceptable)				
Naples, FL 500			5th Avenue South Suite 524				
Suite, Apt. #, Etc.				Suite 524			
City Naple				000000000000000000000000000000000000000	State Zip Co		
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 Alleum Auction  Date 11/17/98							
	GISTERED AGENT MUST SIGN	<u>.</u>	<del> </del>				
<ol> <li>This corporation owes or ha Intangible Personal Propert</li> </ol>	is paid the current yea y tax due June 30.	ar Yes	No 🔲		other side for infor 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 filling 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: HERMINIO MOYULS Herminio Morales 11/17/98 941 263-2810 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Priorie #							
<del></del>		-		<del>/                                    </del>		- (100)	

## - DO NOT REMOVE -

## WILLIAM C.ERICKSON ACCOUNTANT

500 FIFTH AVENUE SOUTH SUITE 524 NAPLES, FLORIDA 34102 (941) 263-2810 FAX (941) 262-5155

November 17, 1998

Division of Corporations P. O. BOX 6327 Tallahassee, FL 32314

RE: Herminio Morales Excavating Service, Inc.
Doc # P94000085924 EIN 65-0554000
NEW MAILING ADDRESS:
500 5th Avenue South #524
Naples, FL 34102

As discussed with your office; we are writing with regard to our client listed above, Herminio Morales Excavating Service, Inc.

Due to an unpleasant business separation, Mr. Morales changed business addresses and accounting services this past year.

We have taken over all of his corporate business and we just discovered, that effective last month, Mr. Morales' company was dissolved.

Following the directions from your office, we have completed the Application for Reinstatement and are including it with a check for \$150. Along with our letter of explanation and apology.

Mr. Morales has a very small two man excavation service and always pays any necessary taxes, licenses and fees due, in a timely manner. This was an honest oversight and we would like to request your consideration in this matter. We would like to request a waiver of the reinstatement penalty and ask that all future correspondence be mailed directly to our office. We have also included a copy of our Power of Attorney which was filed with our local office on this date.

Once again, thank-you very much for your time and assistance.

Sincerely,

WCE/vt

cc: H. Morales enc: Ck # 10402

Reinstatement Application

FDOR POA