

\$1,545.00

1072

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING T

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000017084

1. Corporation Name

He-Man Landscaping, INC.

2. Principal Office Address

19511 Sterling Dr.

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33157

Country

USA

3. Mailing Office Address

19511 Sterling Dr.

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33157

Country

USA

REINSTATEMENT 96-05

4. Date Incorporated or Qualified  
To Do Business in Florida

3/1/95

5. FBI Number

65-0571773

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$9.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Russell Scott Leshner

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

19571 Sterling Dr.

Suite, Apt. #, Etc.

City

Miami, FL

State

FL

Zip Code

33157

500048026535  
03/05/05--01005--001 \*\*151.00

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

[Signature]  
REGISTERED AGENT MUST SIGN

Date

12/11/04

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
pres.	<u>Russell S. Leshner</u>	<u>19511 Sterling Dr.</u>	<u>Miami, FL 33157</u>
vice pres	<u>Todd Leshner</u>	<u>19550 Franjo Rd.</u>	<u>Miami, FL 33157</u>

100044049591  
01/05/05--01014--010 \*\*1415.00

[Signature]

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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]

Date

12/11/04 (305) 378-1291

Daytime Phone #

CR2E081 (01/04)

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To whom it may concern,

I am sending this letter to request that the reinstatement fee be waived in reference to He-man Landscaping (Doc# p95000017089). We never knew that our account was inactive until we went into the bank recently to obtain some information on our account. The annual report which was sent to 11011 sw 162 terr., in approximately 1996 was never received. We had not been at that address since 1994 and had no knowledge of the annual report and fees that were due until recently. We would like to straighten out our account to make it active, and once again, ask that the fee be waived, due to the fact that we never knew about the notice.

Russell S. Leshner  
President- He-Man Landscaping