

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION
REINSTATEMENT



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

FILED

02 JAN 28 PM 4:36

DOCUMENT # P96000018187

1. Corporation Name

D'AMBROSIO Home Improvement, Inc.

500004880105--3

-02/05/02--01040--005

****150.00 ****150.00

500004880105--3

-02/05/02--01040--006

****150.00 ****150.00

01-02

2. Principal Office Address

4100 NW 106 Ave

3. Mailing Office Address

4100 NW 106 Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Coral Springs, FL

City & State

Coral Springs, FL

Zip

33065

Country

US

Zip

33065

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

02/96

5. FEI Number

65-0650934

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

DANIEL D'AMBROSIO

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

4100 NW 106 Ave

Suite, Apt. #, Etc.

N/A

City

Coral Springs

State

FL

Zip Code

33065

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

Daniel D'Ambrosio

Date 12-6-01

REGISTERED AGENT MUST SIGN

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	DANIEL D'AMBROSIO	4100 NW 106th Ave	C.S. Fla. 33065

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:

Daniel D'Ambrosio

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-6-01

Date

Cell #

954-242-0430

Daytime Phone #

HM: 954-345-0279

CR2E081 (9/00)

20fr

D'Ambrosio's Home Improvement, Inc.
4100 NW 166 Ave
Coral Springs, FL 33065

(954) 345-0279

Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

December 5, 2001

Ref: D'Ambrosio's Home Improvement, Inc
Tax ID # 65-0650734

To Whom It May Concern

This letter is to inform you, the State of Florida, Department of Corporations, that we just became aware that our corporation fee for D'Ambrosio's Home Improvement Inc. was not paid. There have been several changes in the past few years. We changed accountants and we believe you had the registered agent address to our old accountant, John Hull. We believe that the original documents/report could of been sent to him. We also moved to another home address. In any event, we never received the report for the year of 2001.

We recently took on a new accountant, Howard Schwartz. He is the one who advised us that our corporation fee was not paid in the year of 2001. We are asking for you to accept this letter of explanation. We do want to continue to do business under the name of D'Ambrosio's Home Improvement, Inc.

Enclosed is a check for One hundred and fifty dollars (\$150.00) and the application retrieved from the internet to reinstate our corporation, D'Ambrosio's Home Improvement.

Thank you

Daniel D'Ambrosio