

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 21 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000042735

1. Corporation Name

EWING WATERPROOFING SYSTEMS, INC.

Principal Place of Business

Mailing Address

1313 NORTHWEST 4TH PLACE
GAINESVILLE FL 32603

1313 NORTHWEST 4TH PLACE
GAINESVILLE FL 32603

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

05/20/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3379325

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	HALL, ESTELLE R	1313 NORTHWEST 4TH PLACE	GAINESVILLE FL 32603
ST	HALL, IRWIN	1313 NORTHWEST 4TH PLACE	GAINESVILLE FL 32603

800008515118
10/22/02--01069--001 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HALL, IRWIN
1313 NW 4TH PL
GAINESVILLE FL 32603

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

CR2E040 (8/02)

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. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/22/02

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

Date

10/22/02

Daytime Phone #

352 374688

10/24/02

EWING WATERPROOFING SYSTEMS, INC.

1313 N.W. 4TH PLACE

GAINESVILLE, FL. 32603

(352)374-6958

10/22/02

Florida Department of State

Re: Wavier of Reinstatement Fee

Please be advised that this for-profit corporation did not receive the two prior UBR notices.

It is therefore requested that the reinstatement fee be waived.

The reinstatement form and fee of \$150.00 is attached hereto.

Ewing Waterproofing Systems, Inc.

By

Irwin Hall, Director