

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -4 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000016801

1. Corporation Name

GATOR BUILDING MAINTENANCE, INC

2. Principal Office Address

283 Cranes Roost Blvd

3. Mailing Office Address

283 Cranes Roost Blvd

Suite, Apt. #, etc.

#111

Suite, Apt. #, etc.

#111

City & State

Altamonte Springs

City & State

FL

Zip

32701

Country

USA

Zip

32701

Country

USA

600008790276

11/04/02--01096--011 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

2/21/97

5. FEI Number

52-2024395

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

Dooley John

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

283 Cranes Roost Blvd

Suite, Apt. #, Etc.

#111

City

Altamonte Springs

State
FL

Zip Code

32701

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

10/29/02

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
1	Dooley, Deborah	283 Cranes Roost Blvd #111	Alt. Springs FL 32701

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:

Deborah Dooley Deborah Dooley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/29/02

Daytime Phone #

407-379-0041

CR2E081 (9/01)

PROFORCE USA

COMMERCIAL CLEANING SYSTEMS™

October 30, 2002

Florida ♦ Georgia ♦ North Carolina ♦ Arizona

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

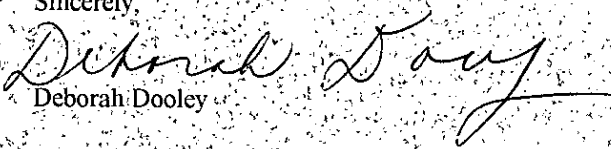
Reference: Gator Building Maintenance, Inc.
Document #: P97000016801
FEIN: 522024395

To whom it may concern:

Please reinstate the above referenced corporation. We relocated to Altamonte Springs Florida and have not received any of the information from the Florida Dept of State. As per my conversation with Michelle of your office, I am submitting a Corporation Reinstatement form (identifying our new address) and a check for \$150.00.

Thank you for your assistance.

Sincerely,


Deborah Dooley

283 Cranes Roost Boulevard ♦ Suite 111 ♦ Altamonte Springs ♦ Florida 32701

(407) 379-0041 ♦ Fax (407) 379-0042