

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
The Governor
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000018018

1. Corporation Name

PUNTA GORDA LEASING CO.

Principal Place of Business

227 TAYLOR ST
PUNTA GORDA FL 33950
US

Mailing Address

232 LIDO DRIVE
PUNTA GORDA FL 33950

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/26/1997

5. FEI Number

65-0752924

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 A 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
VP	VILLADARES, JEANETTE <i>Delete</i>	227 TAYLOR ST	PUNTA GORDA FL 33950
RS	VALLADARES, BLANCA	227 TAYLOR ST	PUNTA GORDA FL 33950
ST	VALLADARES, NETTE	227 TAYLOR ST	PUNTA GORDA FL 33950
ACH	ACHKAR, AMIN <i>Delete</i>	227 TAYLOR ST	PUNTA GORDA FL 33950
P	Roné Barrios Add	227 Taylor St	Punta Gorda FL 33950

8. Name and Address of Current Registered Agent

HORNER, MIKE
222 NESBIT ST
PUNTA GORDA FL 33950

9. Name and Address of New Registered Agent

Name Roné Barrios
Street Address (P.O. Box Number is Not Acceptable)
232 Lido Dr.
Suite, Apt. #, Etc.
City Punta Gorda State FL Zip Code 33950

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

[Signature]
REGISTERED AGENT MUST SIGN

Date 11/3/99

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

11/3/99 941-505-1411
Daytime Phone #

KE

CR25040 (8/99)

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PUNTA GORDA LEASING COMPANY, INC.
232 LIDO DRIVE PUNTA GORDA, FLORIDA 33950
941-505-1411 Fax 941-575-8899

Dear Sir/Madam:

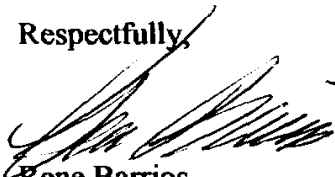
Please accept the enclosed application for corporate renewal for the above mentioned corporation.

Evidently the original application with changes was misplaced. Enclosed please find front and back copy of check received by the state that was sent dated April 20th 1999.

I kindly request that you reinstate our corporate status for Punta Gorda Leasing Company and waive the penalty fees.

If you have any questions I may be reached at 941-505-1411.

Respectfully,


Rene Barrios,
President