PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FOR





## FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State DIVISION OF CORPORATIONS

## P97000021216 **DOCUMENT #**

1. Corporation Name

GARY L. SLOWINSKI MILLWORK, INC.

Principal Place of Business

Mailing Address

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

1700 NW 22 CT., BAY #2

1700 NW 22 CT., BAY #2

FILED

02 OCT 25 PM 2:48

SECRETARY OF STATE TALLAHASSEE, FLORIDA



POMPANO BEACH FL 33069 POMPANO BEACH FL 33069

New Principal Office Address, If Applicable     3. New Mai				ling Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 03/07/1997			
Suite, Apt. #, etc Suite, Apt. #,				etc		- 5. FEI Number	5. FEI Number 65-0733844 Applied For Not Applicable		
City & State City & State						_			
Zip	p Country Zip			Country		6. CERTIFICATE	6. CERTIFICATE OF STATUS DESIRED (\$8.75 Additional Fee required for a Certificate of Status		
7. Names a	and Street Add	dresses of Each Officer an	d/or Director (Fk	orida nonprofi	it corporations must list at I	least 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip		
P	SLOWINSKI, EDDA T			1700 NW 22 CT.			POMPANO BEACH FL 33069		
٧	SLOWINSKI, GARY L			1700 NW 22 CT.			POMPANO BEACH FL 33069		
							0008600338 <del>0008600338</del> 0008600338		
						89/0/30			
8. Name and Address of Current Registered Ager					9. Name and Address of New Registered Agent				
SLOWINSKI, GARY L 521 S. FIG TREE LANE PLANTATION FL 33317						(P.O. Box Number i	er is Not Acceptable) CRT, #2		
					PonPa	ano E	Beach FL	33069	
Signature of Registered Agent  11. I certify that ram 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 frue any accurate, and my signature shall have the same legal effect as if made under oath.									

## GARY L SLOWINSKI MILLWORK, INC. 1700 N.W. 22 Court, Bay #2 Pompano Beach, Florida 33069

PHONE: (954) 979 - 8200 FAX: (954) 979 - 0016

October 23, 2002

Division of Corporations Annual Report/Reinstatement Section P.O.Box 6327 Tallahassee, FL 32314-6327

To Whom It May Concern:

This is to inform you that in September 2002, I had spoken with a woman named Michelle at telephone number 1-850-245-6059. I had stated to her then that our company had never received the Annual Report form. She then informed me that another one would be sent to us, we even verified the information over the phone regarding name and address of our company. She also stated when I receive this to attach a letter letting the Division telling them of the circumstance. Well, I am letting you know that another form had never been sent out to our company, until we received this form attached which was received yesterday, Tuesday, October 22, 2002. I am enclosing a check in the amount of \$150.00 and another in the amount of \$8.75 for a Certificate of Status.

If there should be any additional information needed or, I should be aware of please, do not hesitate to call at the above number.

Your utmost understanding in the above will be greatly appreciated. Thank you.

Singerely

≱dda T. Slowinski President

Encls.(form and cks.)