

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 DEC 15 PM 1:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000030104

1. Corporation Name

NAPLES LIMOUSINE, INC.

Principal Place of Business

Mailing Address

1301 MILANO DRIVE
NAPLES FL 34103

1301 MILANO DRIVE
NAPLES FL 34103

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

04/02/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0740569

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	GRAHAM, CHARLES J (deceased)	1301 MILANO DRIVE	NAPLES FL 34103
P	Steve GRAHAM	5050 Brixton	Naples, FL 34104
			000021850230 12/15/03--01013--030 **120.00
			000021850230 12/18/03--01057--006 **30.00
			000021850230 07/28/03--01054--001 **150.00

8. Name and Address of Current Registered Agent

GRAHAM, CHARLES J
1301 MILANO DRIVE
NAPLES FL 34103

9. Name and Address of New Registered Agent

Name

Steve GRAHAM

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

5050 Brixton

Suite, Apt. #, Etc.

City

NAPLES

State

FL

Zip Code

34104

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

[Signature]
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

7/24/2003

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]
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7/24/2003

Daytime Phone #

CR2E040 (8/02)

Jameson Advisory & Capital, LLC
19204 Sea Mist Lane
Lutz, FL 33558

Florida Department of Revenue
Division of Corporations
Annual Report / Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

To Whom It May Concern:

My client Naples Limousine, Inc. (65-0740569) (P97000030104). Has filed for application for reinstatement. Unfortunately, The Director and Owner, Mr. Charles Graham passed away on the 18th of July 2003. Mr. Graham was not feeling well over the past year and must have overlooked the \$150.00 fee for the Uniform Business Report, due to feeling ill. His son and now owner of Naples Limousine (Steven Graham) will be taking over as Director and Majority Owner. Therefore, I have directed my client to pay the \$150.00 fee, by no means did he intentionally or deliberately not pay the Uniform Business Report. While, according to the many state and federal tax rules and regulations we must all abide by, as long as my client did not intentional avoid the fee, I feel the penalties should be abated. If there are any questions or concerns please feel free to contact me Jim Tamborello.

Sincerely,



James G. Tamborello

Jameson Advisory & Capital, LLC
239-340-1498

Naples Limousine
1301 Milano Drive
Naples, FL 34103
Document # P97000030104

Dear Sir/Madam,

I am writing to state to you that I did not receive the Uniform business report. Please help me get reinstated.

Thank you,
Steve Graham

Any questions please call my accountant James Tamborello at 239-340-1498