

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P97000040409**

1. Corporation Name

**M & M MACHINERY INSTALLATION & MAINTENANCE, INC.**

Principal Place of Business

12366 SOUTHWEST 52 COURT  
COOPER CITY FL 33330  
US

Mailing Address

12366 SOUTHWEST 52 COURT  
COOPER CITY FL 33330  
US

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

05/07/1997

5. FEI Number

65-0769256

Applied For

Not Applicable

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
<del>PD</del>	<del>MADDEN, DANIEL E</del> DECEASED	<del>8251 TOMMY CLEMENTS LANE</del>	<del>INDIANTOWN FL 34956</del>
VPST PD	WOODARD, ROBERT L SR.	12366 SOUTHWEST 52 COURT	COOPER CITY FL 33330
D	WOODARD, ROBERT L SR.	12366 SOUTHWEST 52 COURT	COOPER CITY FL 33330

8. Name and Address of Current Registered Agent

343 ALMERIA AVENUE  
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name

ROBERT L. WOODARD SR.

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

343 Almeria Avenue

Suite, Apt. #, Etc.

Coral Gables

State

FL

Zip Code

33134

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

*Robert L. Woodard Sr.*

REGISTERED AGENT MUST SIGN

Date

November 1, 2002

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:

*Robert L. Woodard Sr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT L. WOODARD SR NOV 1 '02

Date

Daytime Phone #

CR2E040 (8/01)

Monday April 29, 2002

Dear Margarita,

After our conversation in February about my not receiving my annual report form for last year, I waited to see what I would get this year — Nothing!

Either the States comparator has dropped me or my mail is not being forwarded after I moved.

The business address remains the same:  
12366 SW 52 Court      PG7-40409  
COOPER CITY, FL 33330

Although the company has been dormant since I lost my best friend and partner to his death, I need the proper renewals sent to keep the paper work straight.

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Would you please look into this for me  
and bring M & M Machinery Installation and  
Maintenance current.

Thank you,

Robert Woodward Sr.  
M & M Machinery Maintenance