

FROM

(WED) 2.18'04 11:21/ST. 11:20/NO. 4863333482 P 2
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS((H040000355773))
FILED

04 FEB 18 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000048010

1. Corporation Name

Hallmark Decking, Inc.

2. Principal Office Address

2216 Howard Lane

Suite, Apt. #, etc.

3. Mailing Office Address

2216 Howard Lane

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33612

Country

USA

Zip

33612

Country

USA

REINSTATEMENT 02-04

4. Date Incorporated or Qualified
To Do Business in Florida

5/22/97

5. FEI Number

59-3464170

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

Steven W. Vazquez

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

100 N. Tampa Street, Suite 2700

Suite, Apt. #, Etc.

City

Tampa

State
FL

Zip Code

33602

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 2/17/04

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
D	Arnold Thiessen	2216 Howard Lane	Tampa, FL 33612

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:

Arnold Thiessen

2/17/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

((H040000355773))

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Florida Department of State
Division of Corporations
Public Access System

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(((H04000035577 3)))

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To:

Division of Corporations
Fax Number : (850)205-0384

From:

Account Name : POLEY & LARDNER OF TAMPA
Account Number : 071344001620
Phone : (813)229-2300
Fax Number : (813)221-4210

CORPORATION REINSTATEMENT

HALLMARK DECKING, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,050.00

Electronic Filing Menu

Corporate Filing

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