PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<u>~</u>					
. C FIN	skar-væg	Katheria Secretar	TMENT OF STATE ne Harris y of State orporations		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS Of JUL -9 PM 12: 39
DOCUMENT # P 97000076538 1. Corporation Name					- , ook 9 rmi2: 39
Pezzano Lathing, INC				·	ı
2. Principal O	Affice Andress	3. Mailing Office Addres	Mailing Office Address		
780 27th St. NW		780 27th St. NW			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
		ound, Apr. #, etc.		4. Date incorporated or C	Qualified ,
City & State		City & State		To Do Business in Flor	ida 9/2/1997
NAPL	ES.R	NAPCES, FZ		-5FEI Number	Applied For—
Zip	Country	Zip	Country	65-0777	Not Applicable
34120	1 '	34120	USA	CERTIFICATE OF STATUS	DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent					
: 1	Name VINCENT PEZZANO 4000044753841-2				
L	VINCENT PEZ		<u>4000</u> -0	7 /13/01-01102-1 09	
,	Street Address (P.O. Box Number is Not Acceptable) 780 27 th St. NW				***300.00 ****3 0 0.00
;	Suite, Apt. #, Etc.				

(NAPLES			State FL	Zip Code 34120
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.					
Signature of Registered Agent REGISTERED AGENT MUST SIGN				Date _	7-5-01
- ·	10.				
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at lea					
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip
DF	PEZZANO VINCENT		780 27th St. NW		PLES, FZ 3A120
DF	Russetto, A. DANIEL		6057 Hollow Dz		les fl. 34112
					holin
	-	,			21/1/4
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: VINCENT R PLZZANO 7-5-01 941 216-7501 SIGNATURE AND TYPED OR DEMYED NAME OF SIGNING OFFICER OR DIRECTOR Date Date					

PEZZANO LATHING, INC.



July 5, 2001

Division of Corporations

P O Box 6327

Tallahassee, FL 32314

RE: Document P97000076538

To Whom It May Concern:

We are requesting the removal of the penalties for filing the annual report for the above corporation. We did not receive any notification for the 2000 annual report.

Thank you for your consideration.

Sincerely,

Vincent Pezzano