

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 NOV 14 PM 2:34

DOCUMENT # P97000090263

1. Corporation Name

BENCO INDUSTRIES, INC.

Principal Place of Business

Mailing Address

3176 WILDERNESS DRIVE  
MIDDLEBURG FL 32068

3176 WILDERNESS DRIVE  
MIDDLEBURG FL 32068

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

10/20/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3472330

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
PD	BENEDUCE, VINCENT	3176 WILDERNESS DRIVE	MIDDLEBURG FL 32068

300004705229--6  
-12/05/01--01006--008  
\*\*\*\*150.00 \*\*\*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BENEDUCE, VINCENT  
3176 WILDERNESS DRIVE  
MIDDLEBURG FL 32068

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

Date 11/8/2001

REGISTERED AGENT MUST SIGN

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Please Do Not Remove*

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BENCO INDUSTRIES, INC.  
3176 WILDERNESS DRIVE  
MIDDLEBURG, FLORIDA 32068

Florida Department of State  
Division of Corporations  
Annual Report  
P.O. Box 6327  
Tallahassee, Florida 32314-6327

REGARDING:--Uniform-Business-Report - Application-for--  
Reinstatement

It has come to my attention upon receipt of this report that there have been prior mailings, had I received the prior notices it would have been paid and filed timely, as I do all my obligations. I do not understand why I never received the other notices, the address is correct. Is there any way in resolving this issue and waive the additional fee of \$600.00. When I was never notified before now?

Please contact me at the above number or address.

President

Vincent Beneduce

