

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 MAY -1 AM 9:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000103699

1. Corporation Name

Windmill Decorating Inc.

Principal Place of Business

Mailing Address

13807 NW 22 CT
SUNRISE FL 33323
USA

13807 NW 22ND COURT
SUNRISE, FL 33323
USA

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT

99-08

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

12/08/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0826279

Not Applicable

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

(Do NOT Use Post Office Box Numbers)

City / State / Zip

1

2

3

4

P/N/S/NICOLAAS de ZEEUW

13807 NW 22 CT

SUNRISE FL 33323

500003256025--7

-05/17/00--01067--018

****150.00 ****150.00

500003256025--7

-05/17/00--01067--019

****750.00 ****750.00

LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DE ZEEUW, NICOLAAS
13807 NW 22ND COURT
SUNRISE, FL 33322

Name

WAYNE HORWITZ, CPA

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

3511 WEST COMMERCIAL BLVD

Suite, Apt. #, Etc.

SUITE 402

City

FORT LAUDERDALE

State

FL

Zip Code

33309

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

CPA

REGISTERED AGENT MUST SIGN

Date 4-26-00

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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

4-26-00

Date

954-497-8158

Daytime Phone #

CR2E081 (12/98)