

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

03 OCT -2 AM 11:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02-03 UBA

DOCUMENT # P98000003461

1. Corporation Name

Complete Diesel Services, Inc

900023507509  
10/02/03--01019--007 \*\*300.00

2. Principal Office Address 1409 Charles Ct Suite, Apt. #, etc.		3. Mailing Office Address 1409 Charles Ct Suite, Apt. #, etc.	
City & State Fort Myers		City & State Ft Myers	
Zip FL	Country USA	Zip 33919	Country

4. Date Incorporated or Qualified To Do Business in Florida 1-7-98	
5. FEI Number 65-08-13708	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Douglas J. Winfield	
Street Address (P.O. Box Number is Not Acceptable) 1409 Charles Ct	
Suite, Apt. #, Etc.	
City Fort Myers	State FL
	Zip Code 33919

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 Douglas J. Winfield Date 9/29/03  
REGISTERED AGENT MUST SIGN

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
President	Douglas Winfield	1409 Charles Ct	Ft Myers FL 33919
Secretary	Shirley Winfield	1409 Charles Ct	Ft Myers FL 33919

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: Douglas J. Winfield Douglas J. Winfield 9/29/03 239-418040  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2A 10/3

CR2ED01 (10/02)

Sept, 29 2003

To: Department of State of Florida  
Re: Reinstatement of Corporation

Please wave the penalties for the reinstatement of this corporation. We never received any of the reinstatement information due to an address change. Please make sure the address on this corporation is changed.

Thank You,



Douglas Winfield  
Complete Diesel Services, Inc.

enclosed check for 300.00  
for  
2002 + 2003.

ck # 2553