

ANNUAL REPORT

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

DOCUMENT # **P98000010879**

99 OCT 27 PM 4:00

1. Corporation Name
EYSTER AND MURRELL, INC

Principal Place of Business 111 Ashford Drive Winter Springs, Florida 32708	Mailing Address 111 Ashford Drive Winter Springs, FL 32708
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 111 Ashford Drive Suite, Apt. #, etc. City & State Winter Springs, FL Zip 32708	3. New Mailing Office Address, If Applicable 111 Ashford Drive Suite, Apt. #, etc. City & State Winter Springs, FL Zip 32708
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4. Date Incorporated or Qualified To Do Business in Florida February 3, 1998	
5. FEI Number 59-3497897	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P/D	Joseph Ugo Degano	111 Ashford Drive	Winter Springs, FL 32708
VP/D	Carol Ann Degano	111 Ashford Drive	Winter Springs, FL 32708
			400003035824--2 -11/05/99--01011--001 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

Joseph Ugo DEGANO
111 Ashford Drive
Winter Springs, Florida
32708

9. Name and Address of New Registered Agent

Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, Etc.	
City	State Zip Code
	FL

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 REGISTERED AGENT MUST SIGN

Date **10/22/99**

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 **Joseph Ugo Degano** 10/22/99 407-359-1995
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP2E081 (12/98)