

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # P98000040833

1. Corporation Name

RAINBOW PAINTING AND DECORATING, INC. *99AR*

Principal Place of Business

101 BAY MAR DRIVE  
FT MYERS BEACH FL 33931

Mailing Address

PO BOX 2488  
FT MYERS BEACH FL 33932

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/04/1998

5. FEI Number

65-0880861

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D,PS	ORTIZ, JOHN F	101 BAY MAR DRIVE	FT MYERS BEACH FL 33931

500003053335-5  
-11/23/99-01067-013  
\*\*\*\*150.00 \*\*\*\*150.00

TS

8. Name and Address of Current Registered Agent

ORTIZ, JOHN F  
101 BAY MAR DRIVE  
FT MYERS BEACH FL 33931

9. Name and Address of New Registered Agent

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

*John F. Ortiz (CAR)*  
REGISTERED AGENT MUST SIGN

Date

10/2/99

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:

*John F. Ortiz (CAR)*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/2/99

Daytime Phone #

CR2E040 (8/99)

*Accounting*

Fax (941) 423-4378

*Rosile & Herko*

P.O. Box 8007 • North Port, FL 34287

*Tax Services*

Phone (941) 423-6177

November 6, 1999

Florida Dept. of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Fla. 32399

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RE: Painbow Painting & Decorating

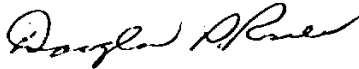
Dear Sirs:

In response to you letter of November 1st rest assured my client did not receive the annual report. I apologize for not making that clear in my previous letter. We are not sure if the problem was with receiving mail since my client went through a divorce or with the attorney who was supposedly handling the corporation. The fact that he did not respond to what was probably a first notice of delinquency suggests he wasn't getting his mail.

This problem is one of the reasons Mr. ortiz sought out another lawyer and accountant.

Please re-instate this corporation.

Sincerely yours,



Douglas P. Rosile

cc:file  
:client