

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT 19 PM 3:31

DOCUMENT # P98000044732

Corporation Name

ING SERVICE & MAINTENANCE CORP.

Principal Place of Business

Mailing Address

131 SOUTHWEST 8TH STREET
PLANTATION FL 33317
US

6131 SOUTHWEST 8TH STREET
PLANTATION FL 33317
US



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

-05/18/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0837686

Applied For

City & State

City & State

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PTD	HILL, MONIKA R	6131 SOUTHWEST 8TH STREET	PLANTATION FL 33317
SVD	HILL, DAVID S	6131 SOUTHWEST 8TH STREET	PLANTATION FL 33317
			300004668963--1 -11/06/01--01054--007 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HILL, DAVID
6131 SW 8ST
PLANTATION FL 33317

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

REGISTERED AGENT MUST SIGN

Date 10-15-01

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:

Monika Hill
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954-584-1272

CR2040 (8/01)

To:

Division of Corporations State of Florida

I just received a reinstatement form on 10-10-2001

Document # P98000044732

This is the first notice I have received this year.

I wish to continue my FL Corporation.

Please except my annual fee of 150.00

Thank you and Have a great Day.

David Hill

Vice President

Viking Service & Maintenance Corp.

6131 SW 8th Street Plantation Florida 33317

Office 954-584-1272

Fax 954-327-1999