

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 13 AM 11:31

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P98000087627

1. Corporation Name

Bill Pfannkuch Framing Inc.

2. Principal Office Address

515-A Paul Morris Dr

Suite, Apt. #, etc.

City & State

Englewood, FL

Zip

34223

Country

USA

3. Mailing Office Address

515-A Paul Morris Dr.

Suite, Apt. #, etc.

City & State

Englewood FL

Zip

34223

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

10/12/1998

5. FEI Number

650873339

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

William A Pfannkuch

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

1958 Trout Circle

Suite, Apt. #, Etc.

City

Englewood

State

FL

Zip Code

34224

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

REGISTERED AGENT MUST SIGN

Date

11/10/03

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
P/D/S/T	William A. Pfannkuch	1958 Trout Circle	Englewood FL 34224

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:

William A. Pfannkuch

William A. Pfannkuch

11/10/2003 (941)474-6545

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR25081 (10/02)