

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 APR 12 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

DANIEL DASH INC

460 - 14ST NE

REINSTATEMENT 03-04

2. Principal Office Address

460 - 14ST NE

3. Mailing Office Address

460 - 14ST NE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NAPLES FLA

City & State

NAPLES FL

Zip

34120

Country

COLLIER

Zip

34120

Country

COLLIER

**4. Date Incorporated or Qualified
To Do Business in Florida**

JAN 6 - 1999

5. FEI Number

593553347

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DANIEL J DASH

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

460 - 14ST NE

Suite, Apt. #, Etc.

City

NAPLES

State

FL

Zip Code

34120

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

Daniel J Dash

REGISTERED AGENT MUST SIGN

Date

4-1-04

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
PR-3	DANIEL J DASH	460 - 14 ST NE	NAPLES FL 34120
TR-2	THOMAS B GLASS	460 - 14 ST NE	NAPLES FL 34120

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:

Daniel J Dash

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-04

Date

239-272-1450 ext 2
239-304-1473 home

Daytime Phone #

CR2001 (01/04)