

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

CORPORATION
REINSTATEMENT

2001



FLORIDA DEPARTMENT OF STATE

Katherine J. Harrell

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 OCT -2 PM 2:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P9900000 6349

1. Corporation Name

RMB CONTRACTOR SUPPLY, INC.

2. Principal Office Address

930 CARTER RD

Suite, Apt. #, etc.

SUITE # 206

City & State

WINTER GARDEN

Zip

Country

34787 USA

3. Mailing Office Address

930 CARTER RD

Suite, Apt. #, etc.

SUITE # 206

City & State

WINTER GARDEN

Zip

Country

34787 USA

4. Date Incorporated or Qualified
To Do Business in Florida

1/19/1999

5. FEI Number

59-3551997

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

DAVID R. BORCHERT

800004645118

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

930 CARTER ROAD

Suite, Apt. #, Etc.

SUITE # 206

City

WINTER GARDEN

State

FL

Zip Code

34787

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

1/1/2001

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
DIRECTOR + PRESIDENT	DAVID R. BORCHERT	930 CARTER ROAD SUITE # 206	WINTER GARDEN, FL 34787

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID R. BORCHERT, DIRECTOR + PRESIDENT

Date

Daytime Phone #

1/1/2001

407-299-0000

CR2E081 (9/99)

2012

WALZER & ASSOCIATES, INC.
A Professional Accounting Firm
STEVEN H. WALZER, B.A., M.B.A., EA.
(407) 299-0086 FAX: (407) 298-3849
8301 FOREST CITY ROAD ♦ ORLANDO, FLORIDA 32810

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32362-1500

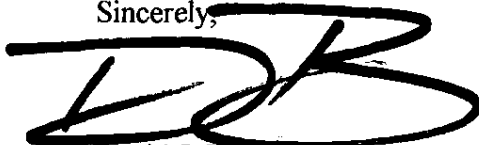
September 26, 2001

RE: P99000006349
RMB Contractor Supply, Inc.
930 Carter Rd. Suite 206
Winter Garden, FL 34787

Dear Sir:

We would appreciate having all penalties abated for not filing the 2000 & 2001 Corporate Annual Report. We moved from 2918 S. Semoran Blvd. # 6, Orlando, FL 32872 to the current address and never received the forms. A 2000 & 2001 completed Corporate Reinstatement form and the \$300 filing fee for 2000 & 2001 is enclosed. Thank you in advance.

Sincerely,



David R. Borchert
President

Enclosures: As detailed above

cc: SHW