

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

~~CORPORATION~~
~~REINSTATEMENT~~



FLORIDA DEPARTMENT OF STATE

Kathleen Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 JAN 26 PM 3:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 99000016239

1. Corporation Name

Custom Stainless Services, Inc.

2. Principal Office Address

11508 N. Armenia Ave

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33612

Country

3. Mailing Office Address

11508 N. ARMENIA AVE.

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33612

Country

4. Date Incorporated or Qualified
To Do Business in Florida

2-18-99

5. FEI Number

59-3557042

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

Tully Leeman

000003656600-8

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

11508 N. Armenia Ave

-02/08/01--01002--086

***300.00 ***300.00

Suite, Apt. #, Etc.

City

Tampa

State
FL

Zip Code

33612

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

Tully Leeman

REGISTERED AGENT MUST SIGN

Date

1/23/01

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
President	Tully J Leeman	11508 N Armenia Ave	Tampa FL 33612

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:

Tully Leeman

TULLY LEEMAN

1-23-01

813 932 3363

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/00)

**Custom Stainless Services
11508 N. Armenia Ave.
Tampa, FL 33612**

January 24, 2001

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

On February 18, 1999 Custom Stainless Services became incorporated and assigned document number 99000016239. Before the end of the Corporation's first year the previous address 7110 N. Duncan Avenue, Tampa, FL 33614 moved to 11508 N. Armenia Avenue, Tampa, FL 33612.

In event of this move, I did not receive the renewal notice for the corporation in the mail. Unfortunately, the mail did not get forwarded to the new address and the renewal payment was not sent.

I have enclosed a check for the amount of \$300.00 for renewing Custom Stainless Services, Inc. for the year of 2000-2001. Please accept my apologies for any inconvenience this may have caused.

Cordially,



Tully J. Leeman
President

ENCLOSURE
JAN 24 2001
TALLAHASSEE, FL 32314