

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 MAR -5 AM 8:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P99000017960**

1. Corporation Name

**The Photo-Documentary Press, Inc**

2. Principal Office Address

**2247 14<sup>th</sup> Ave N.**

Suite, Apt. #, etc.

City & State

**St. Petersburg, FL**

Zip

**33713**

Country

**USA**

3. Mailing Office Address

**Same**

Suite, Apt. #, etc.

City & State

**Florida**

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

**1999**

5. FEI Number

**59-3561-852**

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

**Beth Reynolds**

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

**2247 14<sup>th</sup> Ave N**

Suite, Apt. #, Etc.

City

**St. Petersburg, FL**

State  
**FL**

Zip Code

**33713**

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

**Beth Reynolds**

Date **2-13-03**

REGISTERED AGENT MUST SIGN

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
	<del>Director</del> (B2)		
owner	Beth Reynolds	2247 14 <sup>th</sup> Ave N	St. Pete, FL 33713

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:

**Beth Reynolds**

**2-13-03 727327-1100**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Residence Phone #

CR2E081 (10/02)

# The Photo-Documentary Press, inc.

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St. Petersburg, Florida 33733 OLD  
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~~fax 727.896.3996~~  
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www.photodocumentarypress.com

February 13, 2003

Dear State of Florida

I am writing to revoke the dissolution of my corporation. I became aware of this yesterday when I went online to try and update my address. I have moved 3 times in 3 years because of a divorce.

I have always sent a change of address card to the state but it never seems to get to all the necessary offices. I had to call several times to get my sales tax forms corrected. I understand you are very busy and short staffed but I have made every effort to keep my records current with you.

I never received the uniform business report for 2002. I have always paid on time. I have filled out the correct forms, which I found online. A very helpful man named Tyrone walked me through the process and told me what to do.

Enclosed is the check for \$300, \$150 for 2002 and \$150 for 2003. I would appreciate it if you would wave the extra fee since I feel this not my fault. I am a one-woman company trying to make a small business run.

Thank you for your help!

Sincerely,



Beth Reynolds  
The Photo-Documentary Press, inc.  
2247 14<sup>th</sup> Ave North  
St. Petersburg, Fl 33713  
(727) 327-1106