

PLEASE READ ALL INSTRUCTIONS BEFORE

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 NOV -4 PM 3:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000074689

1. Corporation Name

MURILLO MARTINEZ, INC.

Principal Place of Business

464 TULANE DRIVE

ALTAMONTE SPRINGS, FL 32714

Mailing Address

464 TULANE DRIVE

ALTAMONTE SPRINGS, FL 32714

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable  
1150 WEST STATE ROAD 434

Suite, Apt. #, etc.

City & State

LONGWOOD, FLORIDA

Zip  
32750

Country  
USA

3. New Mailing Office Address, If Applicable  
1150 WEST STATE ROAD 434

Suite, Apt. #, etc.

City & State

LONGWOOD, FLORIDA

Zip  
32750

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida

08/16/1999

5. FEI Number

59-3592619

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee require  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	MURILLO, JOSE	464 TULANE DRIVE	ALTAMONTE SPRINGS, FL 32714
D	MARTINEZ, ROSA	15922 OAKENDELL DRIVE	HOUSTON, TX 77084
D	MARTINEZ, LUIS	15922 OAKENDELL DRIVE	HOUSTON, TX 77084

800024394228

11/04/03--01011--008 \*\*150.00

800024394228

11/04/03--01011--009 \*\*158.75

8. Name and Address of Current Registered Agent

MURILLO, JOSE

464 TULANE DRIVE

ALTAMONTE SPRINGS, FL 32714

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. 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)(f), F.S. The information indicate on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Jose Murillo*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/20/03

Daytime Phone #

7

**MURILLO MARTINEZ, INC**

1150 WEST STATE ROAD 434  
LONGWOOD, FL 32750-5108

Tele/Fax: (407) 834-5002

Tuesday, October 28, 2003

Florida Department of State  
Div of Corporations, Reinstatement Section  
PO Box 6327  
Tallahassee, Florida 32314

RE: Charter Number P99000074689  
FEI # 59-3592619

Dear Sirs,

Attached please find our Application for Reinstatement of the Charter in the above subject reference Corporation. Attached also are two checks, each for \$150 to defray de normal annual Charter Renewal Fee.

We are asking for a waiver on the additional penalty charges due as a result of not renewing within the prescribed time permitted by the Division of Corporations. We believe that the mail did not get to our home and consequently we did not renew. We understand that it is our responsibility to make sure that we take care of these issues as you require, but again, we were unaware of the rule and thought that all was well until recently we discovered that our corporation was administratively dissolved.

We will make sure that in the future this does not happen again. We thank you for your understanding and positive response to this request.

Sincerely,



Jose Murillo  
President.