

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10F2

**CORPORATION REINSTATEMENT**

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

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 01 MAY -7 PM 1:20

DOCUMENT # P99000078630

1. Corporation Name

MAHER METAL-FRAMING, INC.

2. Principal Office Address

1535 PHYLLIS DR

Suite, Apt. #, etc.

City & State

MERRITT ISLAND, FL

Zip

32952

Country

BREVARD

3. Mailing Office Address

1535 PHYLLIS DR

Suite, Apt. #, etc.

City & State

MERRITT ISLAND, FL

Zip

32952

Country

BREVARD

4. Date Incorporated or Qualified To Do Business in Florida

8-30-1999

5. FEI Number

593578674

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

THOMAS R. MAHER

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

1535 PHYLLIS DR

Suite, Apt. #, Etc.

City

MERRITT ISLAND

State

FL

Zip Code

32952

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

Thomas Richard Maher

REGISTERED AGENT MUST SIGN

Date

4-27-2001

9. Names and Street Addresses of Each Officer and/or Director (Florida non-profit 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
PST/D	THOMAS R. MAHER	1535 PHYLLIS DR	MERRITT ISLAND, FL 32952

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 application are true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Thomas Richard Maher Thomas Richard Maher 4-27-2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PH 321 449 0806

20fz

April 25, 2001

Florida Department Of State  
Division Of Corporations  
PO Box 6327  
Tallahassee, Fl. 32314

To Whom It May Concern;

The original Articles Of Incorporation were filed on August 30, 1999 for Maher Metal-Framing, Inc., under Document Number P99000078630. Due to health problems, I was unable to work and had no income. I was hospitalized for back surgery May 3, 2000. At the time the Annual Report was due I was unable to pay the renewal fee. It was explained to me that my only options were to try to get this Corporation Reinstated or start a new Corporation. I would prefer to request a Reinstatement, because I have already established myself in my profession under the name Maher Metal-Framing, Inc.

Attached please find a Corporate Reinstatement and a check for \$300.00. Anything you can do to assist me in this matter would be greatly appreciated.

Sincerely;

A handwritten signature in black ink that reads "Thomas R. Maher". The signature is written in a cursive style with a large, stylized 'T' and 'M'.

Thomas R Maher