

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

**CORPORATION**  
**2000-UBB**



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

**FILED**  
 00 NOV 13 PM 3:11  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # P 99000095519**

**1. Corporation Name**  
 Meerwasser Inc.

**2. Principal Office Address**  
 11705 S. Cleveland Ave  
 Suite, Apt. #, etc. Suite 4  
 City & State Fort Myers FL.  
 Zip 33907 Country USA

**3. Mailing Office Address**  
 11705 S. Cleveland Ave  
 Suite, Apt. #, etc. Suite 4  
 City & State Fort Myers FL.  
 Zip 33907 Country USA

**4. Date Incorporated or Qualified To Do Business in Florida** 10/19/99

**5. FEI Number** 65-0956608  
 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 Eric Dinkel  
 Street Address (P.O. Box Number is Not Acceptable) 1218 Morningside Dr.  
 Suite, Apt. #, Etc.  
 City Fort Myers State FL Zip Code 33901

000003483690  
 12/01/00-01087-017  
 \*\*\*\*150.00 \*\*\*\*150.00

**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 *E Dinkel* Date 11/9/00  
 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
P	Eric J. Dinkel	1218 Morningside Drive	FT. Myers FL 33901
V	Andrea E. Dinkel	1218 Morningside Dr.	FT. Myers FL 33901
T	Eric J. Dinkel	1218 Morningside Dr.	FT. Myers FL 33901
S	Eric J. Dinkel	1218 Morningside Dr.	FT. Myers FL 33901

**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:** *E Dinkel* Eric Dinkel 11/9/00 941-939-1196  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (9/99)

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11705 S CLEVELAND AVE #4  
FORT MYERS, FLORIDA 33907  
941-939-1196  
941-939-9029FAX

11/9/00

To Whom it may Concern,

I Respectfully Request that the Reinstatement Fees be Waived For this Corporation as the Notice of Reinstatement was never Received by me.

I Have enclosed a check For the normal \$150

~~Yearly Fee. IF you need to speak with me~~

my # is 941-939-1196. Thank you For Your understanding.

Sincerely

Eric Dinkel  
President Meerwasser Inc.