

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

00 OCT 30 AM 8:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000106951

1. Corporation Name

VEINO EXCAVATING, INC.

Principal Place of Business

Mailing Address

155 RAILROAD AVENUE
OSTEEN FL 32764

155 RAILROAD AVENUE
OSTEEN FL 32764



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/10/1999

5. FEI Number

65-0976511

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	VEINO, BRADLEY	155 RAILROAD AVENUE	OSTEEN FL 32764
D	VEINO, AUDREY J	155 RAILROAD AVENUE	OSTEEN FL 32764
S/T	VEINO AUDREY J	155 RAILROAD AVENUE	OSTEEN FL 32764
			500003469405--E
			-11/20/00--01011--005
			****150.00 ****150.00
			LS

8. Name and Address of Current Registered Agent

VEINO, AUDREY J
155 RAILROAD AVENUE
OSTEEN FL 32764

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

Audrey J Veino
REGISTERED AGENT MUST SIGN

Date 10/26/00

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)(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:

Audrey J Veino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/26/00
Date

407-323-5875
Daytime Phone #

VEINO EXCAVATING Inc

2 of 2

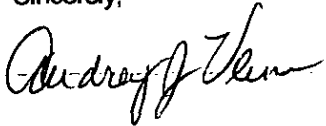
October 26, 2000

DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FLORIDA 32314

ATTN: KATHERINE HARRIS, SECRETARY OF STATE

We received your form in the mail and was surprised to read that it was for a reinstatement, as we are a new corporation. First let me apologize that our check was not sent in a timely manor, but I was unaware of an annual report/uniform business report as required by law. We never received any other papers in our office prior to this one and I definitely would have filled them out in a timely manor and sent in the appropriate fee. After looking over the form we received, it came to my attention that it was mailed to the street address, and in most cases the post office always returns them to sender. So perhaps the other form may have been returned back to your office. Please accept my apology, and find enclosed a check for \$150.00 and this letter which I was told by a young lady in your office to write. Please make sure that your records show that all correspondence should be mailed to the post office box

Sincerely,



Audrey J VEINO
Secretary/Treasurer
PO Box 503

Osteen Fla. 32764