PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.	
APPLICATION CALL DESTRUCTION OF STATE San res. Witham Sere in U.S. DIVISION OF COMPORATIONS The property of the position o	
DOCUMENT # \$19012 98 MAY -4 AM II: 25	
ATLAS FENCE OF FLORIDA, INC. SECRETARY OF STATE TALLAHASSEE. FLORIDA	
IALEANASSEE, TESMON	
Principal Place of Business ATLAS FENCE OF FLORIDA, INC. 805 KAUFMAN AVENUE FT. PIERCE, FL 34950	
If above addresses are incorrect in any way, line through incorrect information and enter correction below. DO NOT WRITE IN THIS SPACE 2. New Principal Office Address, If Applicable 3. New Mailing Address, If Applicable 4. Date Incorporated or Qualified	
Suite, Apt. #, etc. Suite, Apt. #, etc.	
5. FEI Number	Applied For Not Applicable
Zip Country Zip Country contribute of example people of \$8.75 Addition	nal Fee required cate 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 Street Address of Each Officer and/or Director City / State / Zip 1 2 3 (Do NOT Use Post Office Box Numbers) 4	
P MURPHY, BENJAMIN F. 180 CAMINO DEL RIO PT. ST. LUCIE, F	FL 34952
T MURPHY, MILDRED V. 180 CAMINO DEL RIO PT. ST. LUCIE, H	_{FL} 34952
VP DAVIS, JUDY A. 805 KAUFMAN AVENUE FT. PIERCE, FL 3	34950
∂	25/01
900002522725	<u></u> 0
****S15.00 *****	46 5. 00
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name	
MURPHY, BENJAMIN F. Street Address (P.O. Box Number is Not Acceptable)	
180 CAMINO DEL RIO Suite, Apt. #, Etc.	
PORT ST. LUCIE, FL 34952 City State Zip Coc FL	le
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 Date	-
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)	

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any habitity of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

ALLEN STEINHORN & Co., INC.



ACCOUNTANTS AND CONSULTANTS

1001 No. U.S. HIGHWAY ONE SUITE 510 JUPITER, FL 33477-4478 TEL 561-744-2804 FAX 561-744-9665

April 30, 1998

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Atlas Fence of Florida, Inc.. Doc. #S19012 EIN #65-0233102

Gentlemen:

We are herewith enclosing an Application for Reinstatement for the above-captioned, along with a check in the amount of \$515.00 representing the Corporate Annual fee for the years 1996, 1997, and 1998.

We respectfully request that you accept this application and payment as submitted based on the following reasonable cause - you will note that their mailing address on your records is P.O. Box 3192, Ft. Pierce, FL 34948. The taxpayer moved in 1995 to their present location at 805 Kaufman Avenue, Ft. Pierce, FL 34950 and after a period of time the mail was no longer forwarded and therefore, the Annual Report should have been returned to the State of Florida. The fact that the fees were not paid was not discovered until this year upon preparation of the corporation tax reports.

Again, we ask that you reinstate Atlas Fence of Florida, Inc. as submitted as the payment of an additional \$535.00 would create a financial burden at this time.

Sincerely,

Allen A Steinhorn

Enc.

Allen/atl:aas.doc