(n) = 1.05 n= 1.5	er er en			money consequences and a summer
APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMEN Sandra B. Mor Secretary of S DIVISION OF CORPOR	NT OF STATE tham state	DMPLETING THIS F	ОКМ.
DOCUMENT # V10228 1. Corporation Name			99 JAN 19 PM 2: 09	
TERRY & MARGIE, INC.			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business Mailing Address 3308 50TH AVENUE EAST BRADENTON FL 34203 BRADENTON FL 34203 If above addresses are incorrect in any way, line through incorrect information and enter corre		correction below.		
New Principal Office Address, If Applicable Sulte, Apt. #, etc.			Date Incorporated or Qualified To Do Business in Fforida 01/27/1992	
City & State	City & State		5. FEI Number 65-0306955	Applied For Not Applicable
Zip Country	Zip Country	′	6. CERTIFICATE OF STATUS DESIRE	\$8.75 Additional Fee required for a Certificate of Status
7. Names and Street Addresses of Each Officer and/o			3 directors)	
Title(s) Name of Officers and/or Directors 1 2	tle(s) Name of Officers Street and/or Directors 3 (Do NOT Use		of Each Director City / State / Zip e Box Numbers) 4	
DP FANECA, TERRY	FANECA, TERRY 3308 50TH AVE. EAST		BRADENTON FL	
DST FANECA, MARGIE	3308 50TH AVE. EAST		BRADENTON FL	
	REINST	ATEME	W S	18-99
			T	> 11999
				7 5083&1 9901009016
8. Name and Address of Current Registered Agent		Name S	9. Name and Address of New Re	distered Agent 44500.00
YETTER, DONALD W.				
1402 3RD AVE W		Street Address (P.O. Box Number is Not Acceptable)		
BRADENTON FL 34205		Suite, Apt. #, Etc.		
		City State Zip Code		
10. 1, being appointed the registered agent of the above Signature of Registered Agent	f	in and accept the oblig	pations of Section 607.0505, F.S. Date	3-98

12. 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 filling 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:

11. This corporation owes or has paid the current year

Intangible Personal Property tax due June 30.

SMATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Yes 🛛 No 🗌

941-753-2318

(See other side for information on intangible tax.)

Daytime Phone #