

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 SEP 21 AM 10:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97 000006771

1. Corporation Name

Inspectorate America Corporation

2. Principal Office Address

P.O. BOX 87689

Suite, Apt. #, etc.

City & State

Houston, TX

Zip

77287

Country

U.S.A.

3. Mailing Office Address

SAME AS #2

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 00-04

4. Date Incorporated or Qualified
To Do Business in Florida

12/22/1997

5. FEI Number

13-1956968

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

Corporation Service Company

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

1201 Hayes Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301-2525

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

Latish Wh

Date

9/10/04

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
	SEE ATTACHED		000041207700 09/21/04--01034--011 **1350.00

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:

Jim D. Graves

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jim D. Graves, CFO

9/9/04

Date

713-948-5168

Daytime Phone #

CR2E081 (01/04)

2 of 2

**Inspectorate America Corporation
Corporate Officers and Directors**

Officers

President – Neil A. Hopkins (as of February 1, 1995)

Secretary/ Treasurer – Harold F. Cristadoro (as of June 1, 1999)

Asst. Secretary/ Treasurer – Jim D. Graves (as of October 17, 2003)

Directors

1) Neil A. Hopkins – Appointed July 30, 1991

2) Harold F. Cristadoro - Appointed June 2, 1999

ALL ADDRESSES ARE: 5050 Timber Creek
Houston, Texas 77017