<ul> <li>PLEASE READ</li> </ul>	<b>ALL INSTRUC</b>	TIONS BEFORE	COMPLET	ING THIS FORM.
APPLICATION APPLICATION	FLORIDA DEP	ARTMENT OF STATE	=	•
FOR		a B. Mortham		
REINSTATEMENT	f	etary of State		FILED
		OF CORPORATIONS	-	1 I kan buu bus
1. Corporation Name	182			8 FEB 24 AM 7: 42
Fishco, Inc.			TAL	ECRETARY OF STATE LAHASSEE, FLORIDA
Principal Place of Business	Mailing Address		1	
		R	EINICT	ATPARTIT
			T1149 11	ATEMENT 02-98
If above addresses are incorrect in any way, line th  2. New Principal Office Address, If Applicable	3. New Mailing Office		"4 Date Incorn	porated or Qualified
8316 LAKE MARION Rol	120-130	x 699	To Do Busin	ness in Florida 8 - 29 - 83
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. FEI Numbe	
City & State.	City & State	7 50	59-2	318899 Not Applicable
ZIP COOPILY SA	33845	Clyhiry S A	6. CERTIFICATI	E OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Names and Street Addresses of Each Officer and		profit corporations must list at le	east 3 directors)	<del></del>
Name of Officers Title(s) and/or Directors		Street Address of Eac Officer and/or Directo		City / State / Zip
1 2		(Do NOT Use Post Office Box	Numbers)	4
PTC Fisher, Robert 3		16 Lake Munior		Haines City, FL 33844
150 Fisher, Sheller	, A. 83	16 Lake MARio	n Rol	Haines City, FL 33844
\	•			,
			21	000024485326
				<del> </del>
				****908.75 ****908.75
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent	
Nama			t J. Fishen, Jr.	
Street Address (F <b>83</b> L Suite, Apt. #, Etc.			T J. Fisher, Jr.  O Box Number is Not Acceptable)  Lieu Warion Rd	
		City	۵.(	State   Zip Code
<ol> <li>I, being appointed the registered agent of the about</li> </ol>	ove named corporation, an	n familiar with and accept the o		FL   33844
Signature of Registered Agent Rolet Tell	EGISTERED AGENT MILE	ST SIGN		Date 2-18-98
11. This corporation owes or h	as paid the curr	rent year 30. Yes	Î No 🗆	(See other side for information on intangible tax.)
Intangible Personal Proper	ly lax due June	Yes LAS	NO L.	
	olution has been eliminated names of individuals listed	<ul> <li>d, the corporate name satisfies</li> <li>d on this form do not qualify for</li> </ul>	the requirements an exemption und	opter 607 or 617, F.S. I further certify that when filing of section 607.0401 or 617.0401, F.S., that all fees der section 119.07(3)(i), F.S. The information indicated
DIA -	0			
~ , , , ,	MED NAME OF SIGNING OF		2-18-98	Date   1709   Daytime Phone #
Kahent 1.	Fisher J	R		