

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

1998 MAR 27 PM 1:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 993000016904

1. Corporation Name

Semi Cane Investments, Inc.

Principal Place of Business

Mailing Address

P.O. Box 25531

Tampa, FL 33622-5531

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

2. New Principal Office Address, If Applicable

P.O. Box 25531

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. Box 25531

Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

3/1/93

5. FEI Number

59-3170000

Applied For

Not Applicable

City & State

Tampa, FL

Zip

33622-5531

Country

City & State

Tampa, FL

Zip

33622-5531

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Thomas S. Krause	4301 Woodmere Rd.	Tampa, FL 33609
D	Francis M. Curci	14707 Croydon Place	Tampa, FL 33618

600002473576--7  
-03/31/98--01050--009  
\*\*\*\*315.00 \*\*\*\*315.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Thomas S. Krause  
4301 Woodmere Rd.  
Tampa, FL 33609

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

*Thomas S. Krause*

REGISTERED AGENT MUST SIGN

Date 3/25/98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

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 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:

*Thomas S. Krause*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/25/98  
Date

813-627-9003  
Daytime Phone #

CR2E040 (1/98)

# SEMI CANE INVESTMENTS, INC.

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March 25, 1998

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

## RE: CORPORATION REINSTATEMENT

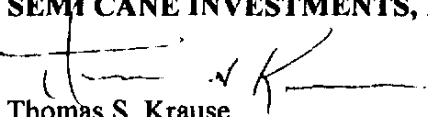
To whom it may concern,

Pursuant to my conversation with a representative from your office, I have attached a reinstatement form and a check in the amount of \$315.00 for the annual fees for 1997 and 1998. I was told that due to the fact that the 1997 annual report was mailed to the wrong address and returned back to the State, that I would not be responsible for the reinstatement fee.

I appreciate your assistance with this matter.

Sincerely,

SEMI CANE INVESTMENTS, INC.

  
Thomas S. Krause,  
President

TSK/kah