PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

99 MAR -5 PM 2:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **628795**

1. Corporation Name

MECHANICAL RESOURCES, INC.

Principal Place of Business	Mailing Address
9410 FL. MINING RD. JACKSONVILLE FL 32202	9410 FL. MINING RD. JACKSONVILLE FL 32202

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
1099 S. ATLANTIC DR.	1099 S. ATLANTIC DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc. M. E. VITRANO
City & State LANTANA, FL	City & State LANTANA, FL
Zip 33462 Country	Zip 33462 Country

REINSTATEMENT 97-99

4. Date Incorporated or Qualified To Do Business in Florida: 07/02/1979

5. FEI Number: 59-2059792 ☐ Applied For ☐ Not Applicable

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 3 (Do NOT Use Post Office Box Numbers)	City / State / Zip 4
PT	BRYANT, WILLIAM J.	10 VALLEY FORGE WAY	HO-HO-KUS NJ
V	BRYANT, MAUREEN A.	10 VALLEYN FORGE WAY	HO-HO-KUS NJ

400003280145A--02
-03/10/99--01109--001
*****525.00 *****525.00

400003280145A--02
-03/10/99--01109--002
*****525.00 *****525.00

400003280145A--02
-03/10/99--01109--003
******8.75 ******8.75

8. Name and Address of Current Registered Agent

BRYANT, JOHN N
1101 BLACKSTONE BUILDING
JACKSONVILLE FL 32202

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City | State FL | Zip Code

3-5-99

CR2E040 (8/97)

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: John N. Bryant — REGISTERED AGENT MUST SIGN — Date: 3-2-99

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: William Bryant PRES — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 3/4/99 — Daytime Phone #: 8004459929