

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

47 AR

FLORIDA DEPARTMENT OF STATE
Tallahassee
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 OCT 27 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F49498

1. Corporation Name

PIKE'S AUTOMOTIVE AND TRUCK REPAIR, INC.

Principal Place of Business

3828 NW 2ND AVE
MIAMI FL 33127

Mailing Address

3828 NW 2ND AVE
MIAMI FL 33127

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/09/1981

5. FEI Number

59-2161751

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PST	PIKE, MICHAEL JOHN	510 W. DILO DR. 3822 N.E. 167 ST	MIAMI BEACH FL N. MIAMI BEACH FL 3822 N.E. 167 ST 33140
V	PIKE, VIRGINIA MARIA	510 W. DILO DR. 3822 N.E. 167 ST	MIAMI BEACH FL N. MIAMI BEACH, FL 33140
			600002332216--1 -10/29/97--01031--020 *****165.00 *****165.00
			600002332216--1 -10/29/97--01031--021 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

PIKE, MICHAEL JOHN
510 W. DILO DR. 3822 N.E. 167 ST
MIAMI BEACH FL 33140 N. MIAMI BEACH FL 33140

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

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

REGISTERED AGENT MUST SIGN

Date

10/23/97

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR25040 (8/97)

2

10/23/97

Mr. Michael J. Pike
c/o Pike's Auto, Inc.
3828 N. W. 2nd Avenue
Miami, Florida 33127
phone 305-576-0076
fax 305-573-0845

Division of Corporations
Annual Report/Reinstatement Section
P. O. Box 6327
Tallahassee, Florida 32314-6327

CERT MAIL #

RE: #F49498

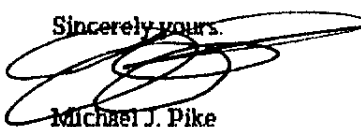
Dear Sirs:

I am sorry to say that we never received your notice that Leslie said would have went out to us previously. We have been a good standing corporation for some years and would hate to have a dissolution or revocation on our records. Our mailing address is not in the best of neighborhoods and I think that this must have gone to someone's home in this area who must have thrown it out. Please help us.

I have enclosed two checks: one is # 2595 for the 165.00 for the annual fee and the other is # 2596 for 8.50 for the certificate of status.

Thanking you in advance, I remain,

Sincerely yours,


Michael J. Pike