

2008 FOR PROFIT CORPORATION REINSTATEMENT

pg 1 of 2

DOCUMENT # F94000002619

1. Entity Name
ULTRAFLOTE CORPORATION



FILED

08 NOV -3 PM 4: 01

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
8558 KATY FREEWAY
SUITE 100
HOUSTON, TX 77024

Mailing Address
8558 KATY FREEWAY
SUITE 100
HOUSTON, TX 77024

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



REINSTATEMENT

10272008 REIN P 10272008 (1/07) 08

4. FEI Number
74-1764286

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

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

City

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2009, Fee will be \$900.00

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
WARGETZ, N S
8558 KATY FREEWAY
HOUSTON, TX 77024

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
HALL, S M
8558 KATY FREEWAY
HOUSTON, TX 77024

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
KERN, R C
8558 KATY FREEWAY
HOUSTON, TX 77024

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
FARES, N I
1415 LOUISIANA STE 3040
HOUSTON, TX 77002

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

T
WHITNEY, J
8558 KATY FREEWAY STE 100
HOUSTON, TX 77024

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
MARSHALL, G
8558 KATY FREEWAY STE 100
HOUSTON, TX 77024

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul Whitney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-31-08

Date

713-461-2100

Daytime Phone #



October 29, 2008

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

Dear Sir or Madam:

RE: Notice of Dissolution or Revocation

Enclosed please find our signed reinstatement form. There appears to be a misunderstanding on our part with our 2008 Annual Report Online Filing. In addition there was a personnel change in our Accounting Department this year. Per my conversation with a representative from your office there were three attempts made to file our 2008 return (attempted by previous accountant) but the report never posted completely through the system. A review of the paperwork in our file shows a tracking number assigned on Jan 3rd (600113634826) for the 2008 filing. We are not sure what went wrong but in good faith we have enclosed \$150 and would like this letter to serve as a request to waive the additional \$600 reinstatement fee.

Sincerely,

Jarel Whitney
Controller