

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 12 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000004415

1. Corporation Name

TRANS KEYS UMBRELLA, INC.

Principal Place of Business

Mailing Address

12118 NORTH LOOP ROAD
SAN ANTONIO TX 78216
18100 Hwy. 281 N.
Suite 108 Box 147
San Antonio, TX 78232

12118 NORTH LOOP ROAD
SAN ANTONIO TX 78216
18100 Hwy. 281 N.
Suite 108 Box 147
San Antonio, TX 78232

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



REINSTATEMENT 08-99

4. Date Incorporated or Qualified
To Do Business in Florida

09/11/1995

5. FEI Number

74-2752084

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PC	CRAIG, WARREN G	4522 SPRUCE STREET	TAMPA FL 33607
V	MOHAN, KEITH K	4522 SPRUCE STREET	TAMPA FL 33607
ST	MORROW, MICHAEL	4522 W. SPRUCE STREET	TAMPA FL

200002814402-8
03/22/99 01149-011
***900.00 ***900.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CRAIG, WARREN
4522 SPRUCE STREET
TAMPA FL 33607

Craig. warren
1355 Pinellas Bayway S.
21
Tierra Verde, FL
33718

Name

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

Suite, Apt. #, Etc.

City

200002814402-8
03/22/99 State 1248 Code 012
*****8.75 FL *****8.75

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

Warren Henry

REGISTERED AGENT MUST SIGN

Date: 12/30/98

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:

Warren Henry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/30/98

Date

727-887-6954

Tallahassee, Florida