

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # F95000006106

1. Corporation Name

CYBERTRON, INC.

FILED

96 NOV 20 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

3436 HIGHWAY 45 N
MERIDIAN MS 39301

Mailing Address

3436 HIGHWAY 45 N
MERIDIAN MS 39301

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/14/1995

5. FEI Number

64-0868215

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

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
PD	HOLLADAY, F E	3436 HIGHWAY 45 N	MERIDIAN MS 39301
DV	EASTWOOD, STEVEN M	3436 HIGHWAY 45 N	MERIDIAN MS 39301
DST	HOLLADAY, CLAY E	3436 HIGHWAY 45 N	MERIDIAN MS 39301
DV	EUBANKS, RONALD	648 S. PERRY STREET	MONTGOMERY AL 36104

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number)

Suite, Apt. #, Etc.

City

State

Zip Code

FL

33324

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of
Registered Agent

Tanya M. Villar
TANYA M. VILLAR
REGISTERED AGENT MUST SIGN

Date

11-18-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

Tanya M. Villar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-4-96

Date

(601) 693-2697-111
Daytime Phone