

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 # F96000005322

1. Corporation Name

SKY TREK INTERNATIONAL AIRLINES, INC.

Principal Place of Business

Mailing Address

~~5707 HUNTSMAN RD.~~

~~5707 HUNTSMAN RD.~~

~~STE 101~~

~~STE 101~~

~~RICHMOND INT'L AIRPORT VA 23250~~

~~RICHMOND INT'L AIRPORT VA 23250~~

~~US~~

~~US~~

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

67 SCOTCH RD

(SAME)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LEWIS NJ

City & State

Zip

08628

Country

USA

Zip

Country

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
PD	IVERSON, ROBERT W II	783 VALLEY ROAD	UPPER MONTCLAIR NJ 07043
V	HENDON, B W JR	46 EGGERT AVE.	METUCHEN NJ 08840
STVC	CARTER, HUGH D	6102 ST. ANDREWS LANE	RICHMOND VA 23226
<del>V</del>	<del>TIEDEMAN, WILLIAM</del>	<del>121 SHERMAN RIDGE RD</del>	<del>SUSSEX NJ 07401</del>
V	LEWIS BALDWIN	257 CENTRAL AVE	HUMAROCK MA 02047

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~LEE, RANDALL J~~

~~JET LIFT INTERNATIONAL, ORLANDO-SANFORD~~

~~2735 S. MELLONVILLE AVE. SUITE 219~~

~~SANFORD FL 32773~~

~~RONALD CARDWELL~~

Name

RONALD CARDWELL

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

3978 NW73 WAY

Suite, Apt. #, Etc

City

CORAL SPRINGS

State

FL

Zip Code

33065

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

*R. Cardwell*

REGISTERED AGENT MUST SIGN

Date

1/8/99

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

SIGNATURE AND TYPE (I) OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*B. Wayne Henderson Jr*

1/8/99 (609)671-0200

99 FEB 22 PM 3:38

RECEIVED  
TALLAHASSEE, FLORIDA



REINSTATEMENT

10/14/1996

5. FEI Number

54-1788661

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

CR2E040 (9/98)