

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

APPROVED
 AND
 FILED

98 DEC 17 PM 1:24

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **H07788**

1. Corporation Name
KIRK ENTERPRISE, INC.

Principal Place of Business 4700 S.W. 108TH AVENUE MIAMI FL 33165	Mailing Address 4700 S.W. 108TH AVENUE MIAMI FL 33165
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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		4. Date Incorporated or Qualified To Do Business in Florida 06/13/1984	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-2620444	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
PD	KIRK, CHRISTOPHER H	4700 SW 108 AVE	MIAMI FL

800002720808--3
 -12/23/98--01049--011
 ***150.00 ***150.00

JA 12/21

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
KIRK, CHRISTOPHER H 3785 N.W. 82ND AVE. SUITE 102 MIAMI FL 33166		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL	

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 ~~SIGNATURE REQUIRED~~ Date 12-22-98
 REGISTERED AGENT MUST SIGN

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 REQUIRED~~ Date 12-22-98 305-876-8867
 SIGNATURE AND EITHER PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2ED040 (9/98)

KIRK ENTERPRISE INC.

FLIGHT AND PILOT SERVICES

4700 SW 108 AVE.

MIAMI FL 33165

(305) 876-8867 FAX (305) 226-7156

12-10-98

Sandra B Mortham
Secretary of State

Dear Ms.Mortham,

After receiving the notice of administrative dissolution I contacted your department by telephone.

I informed the gentleman that I had not received either the first or second notice for the corporate report and that at this time if I was forced to pay the fines against my corporation I would not be able to continue operating.

I was then told that as I had not received the other notices to please file the reinstatement application along with the \$150.00 annual fee.

If you have any further questions please contact me at the listed daytime phone on the application.

Thank you for your time,

Sincerely



Christopher H.Kirk
President