PLEASE READ A	ALL INSTRUCTIONS	REFORE C	OMPLETING	THIS FORM.	•	
APPLY TO REINSTATE ME	FLORIDA DEPARTMEI Sandra B. Moi Secretary of S	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		The transfer of the state of th		
DOCUMENT # 1. Corporation Name K00168		97 SEP -8 *** 8: 57				
KIM BROWNIE AND SONS MOVING ENGINEERS, INC.			SECRÉ DAY OF STATE TALLAHASSEE FLORIDA			
Principal Place of Business	Mailing Address					
2876 N/E Timberlane Ct. Jensen Beach, Fl. 34957	P.O. 1114 Jensen Beach, Fl	L. 34957				
If above addresses are incorrect in any way, line through incorrect information and enter co 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable			Date Incorporated of To Do Business in F	Elorida		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		10/28/87			
City & State	City & State		Applied Fol		Applied For Not Applicable	
Zip Country	Zip Countr	у	6. CERTIFICATE OF STA		itional Fee required tificate of Status	
7. Names and Street Addresses of Each Officer and/o		·	st 3 directors)			
Title(s) Name of Officers and/or Directors Street Address of Each Officer and/or Director City / State / Zip 3 (Do NOT Use Post Office Box Numbers) 4					,	
P Brownie, J. Kim	20 3334	NIE	·	nsen Beeck		
	P.O. 1114	2876 11m	JRT, 3:B	nsen Beach, Fl.	34957	
VP Brownie, Jill P.O. 1114 28767		2876Time	SERLANE Je	nsen Beach, Fl.	34957	
		Ja	10 m JB	cnBack.		
			epoi	00228964 -09/10/970109 ****165,00 **	F62 11016 **165.00	
				$\mathcal{A}\mathcal{D}$		
8. Name and Address of Current R	egistered Agent	Name	9. Name and Address	of New Registered Agent		
Ctrost Address (F			M Brownic O. Box Number is Not Acceptable)			
P.O. 1114 Jensen Beach. F1. 34957 Suite, Apt. #, Etc.			E-Timber lan	u Ct. Jensen E	seach.	
•		1004 17-0				
101, being appointed the registered agent of the abov	e named corporation, am familiar wit	Jewsen th and accept the obli	Beach	State Zip C	₩357	
Signature of Registered Agent _ A dim Break	GISTERED AGENT MUST SIGN	·	Date	0.10.07		
11. Does this corporation pay as Dept. of Revenue under S. 1	ny intangible tax to th 199.032, Florida Statu	e utes. Yes⊠	□ No □	(See other side for info on intangible tax		
12. I certify that I am an officer or director or the receive this reinstatement application, the reason for dissolution owed by the corporation have been paid and the nation this application is true and accurate, and my sign	ition has been eliminated, the corpoi imes of individuals listed on this forn	rate name satisfies th n de not qualify for a	ne requirements of section n exemption under section	n 607 0401 or 617 0401 F.S.	that all fees	
SIGNATURE: SIGNATURE AND TYPED ON PHIN	Ked Name of Sickling Propagation	Я естов	8 18 9-	7 561 - 336 - te Daylime Pho	3116 one#	





P.O. Box 1114 • Jensen Beach, Florida 34958

(561) 334-7664 FAX 561-334-6542

August 18, 1997

Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Reference: Kim Brownie & Sons, Inc.

Brownie

Enclosed please find the reinstatement form which you recently sent to us.

We never received the form that is why we requested this due to a change of address.

We apologize for the delay and we are enclosing a check for \$165.00 which I spoke to you about.

Thank you very much.

Very truly yours,

Kim Brownie