

APPLICATION
FOR
REINSTATEMENT



FILED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L28173

PEI EXPORT, INC.
6429 FOREST LAKE DRIVE
ZEPHYRHILLS, FLORIDA 33540

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ZEPHYRHILLS, FLORIDA 33540

\$8.75 Additional Fee required for a Certificate of Status

[illegible]

ALLAN WEBB
6429 FOREST LAKE DRIVE
MEPHYRHILLS, FL. 33540

Name
ALLAN WEBB

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

6429 FOREST LAKE DRIVE

Suite, Apt. #, Etc.

City

ZEPHYRHILLS

State

FL

Zip Code

33540

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

REGISTERED AGENT MUST SIGN

Date **4/14/97**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/97 (813) 783-7979

Date _____ Daytime Phone # _____

CR2E040 (12/96)