

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
04 DEC 15 PM 12:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # K34060

**1. Corporation Name**

SOUTHEAST AERO-TEK, INC.

1365 MERCURY STREET  
P. O. BOX 1277

**2. Principal Office Address**

1365 MERCURY STREET

Suite, Apt. #, etc.

City & State

MERRITT ISLAND, FL

Zip

32953

Country

USA

**3. Mailing Office Address**

P. O. BOX 1277

Suite, Apt. #, etc.

City & State

SHARPES, FLORIDA

Zip

32959-1277

Country

USA

**4. Date Incorporated or Qualified**

To Do Business in Florida 09/20/1988

**5. FEI Number**

59-2912131

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☒

\$8.75 Additional Fee required  
for a Certificate of Status

500043428825  
12/15/04--01020--001 \*\*2611.25

**REINSTATEMENT** 91-04

**7. Name and Address of Current Registered Agent**

Name

RANDALL W. SMITH

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

1365 MERCURY STREET

Suite, Apt. #, Etc.

City

MERRITT ISLAND

State

FL

Zip Code

32953

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of

Registered Agent

*Randall W. Smith*  
REGISTERED AGENT MUST SIGN

Date 12/8/04

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	RANDALL W. SMITH	1365 Mercury Street	Merritt Island, FL 32953

**10. 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:**

*Randall W. Smith*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/8/04

Daytime Phone #

CR2E081 (01/04)