

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 AUG -5 PM 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L37879

1. Corporation Name

Global Coverage, Inc
604 SW 20 Terr
CAPE CORAL, FL 33991

2. Principal Office Address

604 SW 20 Terr

Suite, Apt. #, etc.

3. Mailing Office Address

604 SW 20 Terr

Suite, Apt. #, etc.

City & State

Cape Coral FL

City & State

Cape Coral FL

Zip

33991

Country

USA

Zip

33991

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12-89

5. FEI Number

65-0177112

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Richard Stethem

500022027085

08/04/03--01031--012 **150.00

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

604 SW 20 Terr

500022027085

08/04/03--01031--013 **150.00

Suite, Apt. #, Etc.

City

Cape Coral

State

FL

Zip Code

33991

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

Richard Stethem

REGISTERED AGENT MUST SIGN

Date

7-31-03

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
Pres	Richard Stethem	604 SW 20 Terr	Cape Coral, FL 33991

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:

Richard Stethem

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Stethem 7-31-03

Date

Daytime Phone #

239
772-9662

CR2081 (10/02)

272

**Global Coverage Inc.
Richard D. Stethem
604 SW 604th Terrace
Cape Coral, FL 33991
(239) 772-9662**

July 31, 2003

Florida Dept of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Corporation Reinstatement for Global Coverage, Inc. *Letter # 503 A00032656*
L37879 for 2003

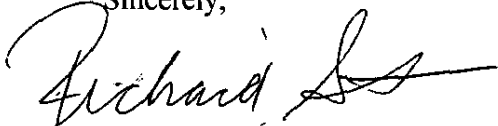
Dear Mr. Scott,

Please be advised that the fee for 2002 Annual Report was paid, but that a notice to correct the address of the corporation was never received. (Copy of check for 2002 is enclosed)

Please find checks in the amount of \$300.00 for the reinstatement of my corporation for 2003.

Thank you for your attention to this matter.

Sincerely,



Richard D. Stethem