

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS



FILED

01 NOV 28 PM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L39575

1. Corporation Name

GOVESAN AMERICA CORPORATION

Principal Place of Business

2357 VENTURA DRIVE, #112
WOODBURY MN 55125

Mailing Address

2357 VENTURA DRIVE, #112
WOODBURY MN 55125

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.
2041-A Wooddale Drive

City & State
Woodbury MN

Zip 55125 Country USA

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
939 Monocacy Rd

City & State
York PA

Zip 17404 Country USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/26/1989

5. FEI Number

65-0161953

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	SAN MARTIN, LUCIO JR.	TORRES QUEVEDO 7-9, 28100 ALCIBE ORO, 76 (Pol. Ind. Sur) 28770	MADRID, SPAIN Colmenar Viejo (Madrid) Spain
VTSS	RODRIGUEZ-MACEDA, L. MIGUEL	2357 VENTURA DRIVE, #112 2041-A Wooddale Drive	WOODBURY MD 55125 Woodbury MN 55125

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****750.00 ****750.00

8. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS STREET
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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

Brian Courtney
as its agent

Date

11-26-01

11. 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 Rodriguez - Maceda

651 731 6330

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2040 (8/01)