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Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

N 73886

SECURITY OF STATE
IN LAFAYETTE, MISSISSIPPI

REINSTATEMENT 89-99

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

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Country

5. FBI Number
65-0034848

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)

600002925526--6
-07/07/99--01073--019
***1983.75 ***1983.75
600002925526--6
-07/07/99--01073--020
*****8.75 *****8.75

9. Name and Address of New Registered Agent

Name _____

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

Suite, Apt. #, Etc. _____

City _____ State _____ Zip Code _____

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 ☒ *Kathia Lee Bell, President/Director* Date *June 24, 1999*
REGISTERED AGENT MUST SIGN

11. This corporation owes the current year Intangible Personal Property Tax due June 30. 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:

x *Patricia Lee Bell* *Arrested* *June 24, 1999* *(954) 565-8982*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #