

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 NOV -3 AM 11:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000047918

1. Corporation Name

Crankit, Inc.

2. Principal Office Address

3821 Fiscal Court

Suite, Apt. #, etc.

City & State

Riviera Beach, FL

Zip

33404

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 02-03

4. Date Incorporated or Qualified
To Do Business in Florida

May 15, 2000

5. FEI Number

65-1010188

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

George Loukas

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

3821 Fiscal Court

Suite, Apt. #, Etc.

City

Riviera Beach

State

FL

Zip Code

33404

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

REGISTERED AGENT MUST SIGN

Date 10-29-03

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.	George Loukas	3825 Torres Cir. WPB, FL 33409	WPB, FL 33409

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

George Loukas

10-29-03 561-801-3146

Date

Daytime Phone #

CR2E081 (10/02)

Crankit, Inc.

3821 Fiscal Court
Riviera Beach, FL 33404
www.crankithosting.net

Thursday, October 30, 2003

RE: Reinstatement

To whom it may concern:

In 2002, I did not receive a notice or form and was not aware that my company had dissolved.

Please waive the late fee.

Enclosed is a check for \$300.00.

If you have any questions, please contact me at 561-801-3146.

Thank you.

Sincerely,
George Loukas