

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000053415

1. Corporation Name

RETRO TECH, INC.

Principal Place of Business

Mailing Address

211 FLORIDA STREET
STUART FL 34997

2180 SE OCEAN BLVD
STUART FL 34996

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

2180 SE OCEAN BLVD
Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
STUART FL

City & State

Zip Country
34996

Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/24/2000

5. FEI Number

65-1012258

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	WARREN, TRACIE	4652 SE CHATHAM AVE	STUART FL 34997

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BASS, DONALD L
7166 SE OSPREY STREET
HOBE SOUND FL 33455

Name

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

Suite, Apt. #, Etc.

City

State
FL

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. or 617.0505, F.S.

Signature of
Registered Agent

Donald L. Bass

REGISTERED AGENT MUST SIGN

Date 10-15-03

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-15-03 772-286-3112

CH2E040 (7/03)

2012

RETRO TECH, INC.
2180 East Ocean Blvd.
Stuart, FL. 34996

10/15/03

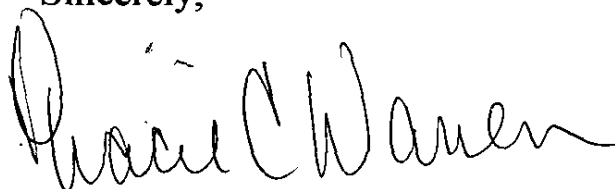
RE: Application for Reinstatement

To Whom It May Concern

In reply to the attached notice I have enclosed my renewal check in the amount of \$150.00. Unfortunately, I did not receive my renewal and therefore did not remit the fee.

I don't know why the renewal was not received and I hope this oversight can now be corrected.

Sincerely,

A handwritten signature in cursive script, appearing to read "Tracie C. Warren".

Tracie C. Warren