

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 SEP 22 AM 11:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00600059984**

1. Corporation Name

Tropical Rock Systems, Inc.

2. Principal Office Address

735 Ave O. SW

Suite, Apt. #, etc.

3. Mailing Office Address

Po Box 9011

Suite, Apt. #, etc.

City & State

Winter Haven FL

City & State

Winter Haven, FL

Zip

33880

Country

U.S.A.

Zip

33880

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-1035944

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

900023577309

10/06/03--01016--012 **300.00

7. Name and Address of Current Registered Agent

Name

Nicholas J. Bell

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

735 Ave O. SW

Suite, Apt. #, Etc.

City

Winter Haven

State

FL

Zip Code

33880

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

Nicholas J. Bell

Date

REGISTERED AGENT MUST SIGN

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
PIVP ST	Nicholas J. Bell	735 Ave O. SW	Winter Haven FL 33880
	Nicholas J. Bell		

REINSTATEMENT

02-03

TS

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:

Nicholas J. Bell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

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July 22, 2003

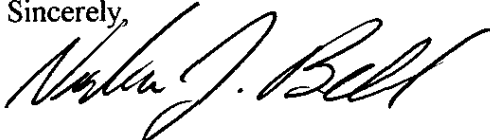
Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, Florida 32302-1500

Dear Secretary of State:

This is a letter of request to please waive the additional late fees associated with the filing of the Uniform Business Report (UBR). Please be advised, Tropical Rock Systems, Inc. has never received the Uniform Business Report form. In recently hiring a secretary it was brought to my attention the filing requirement of the UBR. In relying on my CPA to make all the necessary filings for my company I was unaware this form had not been filed.

Enclosed is a check for \$300.00 for the 2002 and 2003 UBR filings fees. If you would please waive this one time late fee associated with these filings. Tropical Rock Systems, Inc., owner is now fully aware of the requirement of the UBR filing for an active corporate status, will file this form on or before May 1st hereafter. Thank you for your consideration in this matter.

Sincerely,



Nicholas J. Bell

CONFIDENTIALITY OF THIS DOCUMENT
CORPORATION RECORDS AND THE INFORMATION OF PUBLIC RECORDS IS PROTECTED BY THE
FLORIDA PUBLIC RECORDS ACT. ANY DISCLOSURE OF THIS INFORMATION TO THE
PUBLIC IS PROHIBITED. ANY VIOLATION OF THIS ACT IS A VIOLATION OF THE
FLORIDA PUBLIC RECORDS ACT AND IS A VIOLATION OF THE
FLORIDA PUBLIC RECORDS ACT.