

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV 25 PM 3:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000020667

1. Corporation Name

HURRICANE INDUSTRIAL DIESEL, INC.

Principal Place of Business

Mailing Address

297 POWER CT.
SANFORD FL 32771

297 POWER CT.
SANFORD FL 32771



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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/23/2001

5. FEI Number

01-0754666

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	SMITH, DAVID S	113 RED BAY DR.	LONGWOOD FL 32779

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SMITH, DAVID S-
113 RED BAY DR.
LONGWOOD FL 32779

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

C.R.2E040 (8/02)

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 11-8-02

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
David S. Smith

Date

Daytime Phone #

11-8-02 321-229-2418



"Quality Heavy-duty Diesel Products"

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

November 8th 2002

Dear Sirs:

This is a request to reinstate Hurricane Industrial Diesel Inc. to an "active" status with out any penalty fee. When the filing fee of \$150.00 was paid to you on the 26th of April via US Postal Service Over Night, I was under the impression it was paid on time and everything was properly taken care of. Much to my concern I received your notice of "Administrative Dissolution or Revocation" document and immediately called you. All documents were sent to my accountant. **I did not receive any prior uniform business report (UBR) notices.** Unfortunately my accountant was going through a very unpleasant divorce and I do not know what she filed. Since then, she has also moved out of State.

I am working with a new accountant now and will make sure all future correspondence is on time and accurate.

I thank you for you help in this matter.

Sincerely

A handwritten signature in black ink, appearing to read "David S. Smith", written over a horizontal line.

David S. Smith