

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 AM 10:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000102887

1. Corporation Name

SPACE TRANSPORTATION CORPORATION

Principal Place of Business

2612 S RIVERVIEW DRIVE
MELBOURNE FL 32901

Mailing Address

2612 S RIVERVIEW DRIVE
MELBOURNE FL 32901

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

4. Date Incorporated or Qualified
To Do Business in Florida

10/24/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	PALMER, WILLIAM R	2612 S RIVERVIEW DRIVE	MELBOURNE FL 32901
P	THOMAS A. GORFIDER	2107 Helen St	MELBOURNE FL 32901

700009208957
11/25/02 01086 001 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PALMER, WILLIAM R
2612 S RIVERVIEW DRIVE
MELBOURNE FL 32901

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/22/02

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/22/02

Daytime Phone #

CR2E040 (8/02)



P.O. Box 2365 • Melbourne, FL 32902
(321) 953-2550 office • (321) 722-9099 fax

November 16, 2002

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Re: Space Transportation Corporation - Reinstatement

Dear Department of State;

Thank you for pointing out the fact that we have somehow not provided payment and filed the appropriate paper work required to maintain our status as a Florida Corporation.

Space Transportation Corporation is the new name of this corporation, changed early this year from "Wild Energy". We have no record of receipt for updated filing as "Space Transportation Corporation" or "Wild Energy". In addition we have no record of payment to the Department of State, therefore we recognize our delinquency as you have now pointed out.

We wish to remain a Florida Corporation, and therefore are providing this request for reinstatement with our payment.

Please accept our apology if any of this was do to an error on our end.

Yours, respectfully,



Thomas A. Goffinet
President, CEO

Office: (321) 953-2550
Cell: (321) 794-9507