

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

191

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV -3 PM 1:25

DOCUMENT # PD2000009917

1. Corporation Name

Steve Cole C.D.T., Inc

000023524410

10/03/03--01007--004 **150.00

2. Principal Office Address

180 South Cherry St
Suite, Apt. #, etc.

Suite E

City & State
Monticello

Zip Country
32344 Jefferson

3. Mailing Office Address

180 South Cherry Street
Suite, Apt. #, etc.

Suite E

City & State
Monticello

Zip Country
32344 Jefferson

4. Date Incorporated or Qualified
To Do Business in Florida

12/12/01

5. FEI Number

59-2532106

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

Cathy Cole

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

654 Bissett Dairy Rd.

Suite, Apt. #, Etc.

City

Monticello

000023524410

11/12/04--01069--017 **150.00

State

FL

Zip Code

32344

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

Catherine Cole

Date

10-31-04

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
P.	Steve Cole	654 Bissett Dairy Road	Monticello, FL 32344
V.P.	Cathy Cole	654 Bissett Dairy Road	Monticello, FL 32344

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:

Steve Cole President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-31-04

Daytime Phone #

950-997-1121

CP25081 (01/04)

182

October 30, 2004

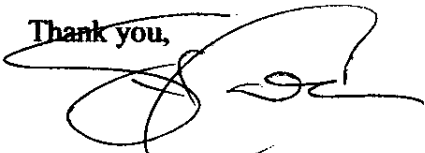
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn: Eula Peterson

Dear Ms Peterson;

Thank you for your help on the phone. We are enclosing a check for the requested \$150.00. As per our conversation October 27, 2004, our Corp. was dropped due to an error on the 2003 form although the 2003 fee was paid by check #1010. Please reinstate Steve Cole C.D.T., Inc. to corporate status.

Thank you,



Steve Cole C.D.T., Inc.
180 South Cherry Street
Suite E
Monticello, FL 32344
Phone: (850) 997-1121
FAX: (850) 997-2221
Document #P02000009917