

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 OCT 22 AM 8:00

DOCUMENT # P02000055095

1. Corporation Name

NEOGEN TECHNOLOGIES, INC.

Principal Place of Business

Mailing Address

~~53553 NW 35 AVE~~  
~~FT LAUDERDALE FL 33309~~

~~53553 NW 35 AVE~~  
~~FT LAUDERDALE FL 33309~~

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.

3828 NW 126 AVE

3828 NW 126 AVE

Coral Springs, FL

Coral Springs, FL

Zip 33065 Country Broward

Zip 33065 Country Broward

4. Date Incorporated or Qualified  
To Do Business in Florida

05/16/2002

5. FEI Number

01-0606680

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
PD	DANIELS, ABBEY	1818 NW 126 WAY	CORAL SPRINGS FL 33071
VD	BIGGIE, JOHN	3041 NE 48 STREET	LIGHTHOUSE PT FL 33064
VD	BIGGIE, LYDIA	3041 NE 48 STREET	LIGHTHOUSE PT FL 33064
VD	PLOTKIN, JACUETTA	81284 104 TERR SOUTH	BOCA RATON 33 33498
VD	DAWSON, JOHN	BOX 189 644 SHREWSBURY COMMON AV	PLANTATION FL 17361
STD	ROLF, ROGER	1741 NW 95 AVE	PLANTATION FL 33322

8. Name and Address of Current Registered Agent

ROLF, ROGER  
53553 NW 35 AVE  
FT LAUDERDALE FL 33309

9. Name and Address of New Registered Agent

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 *Roger Rolf*  
REGISTERED AGENT MUST SIGN

Date 10-17-03

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 *Roger Rolf*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-17-03 954-739-4972

Daytime Phone #

CR2E040 (7/03)

***Neogen Technologies, Inc.***  
3828 NW 126 Ave.  
Coral Springs, FL 33065

October 17, 2003

Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314-6327

Re: Reinstatement of Neogen Technologies, Inc FEI# 01-0606680

Dear Sir:

We received the attached application for reinstatement even though we registered back in March 2003. Upon discussion with one of your agents, we apparently were sent a letter on March 25, 2003 (which we never received) informing us that our FEI number was missing from our application.

The attached reinstatement application has our FEI number included along with a change of address. Please see that Neogen is reinstated.

Sincerely,



Roger Rolf  
Registered Agent