

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000086528

Corporation Name

K.M. FLECK ENTERPRISES, INC.

FILED

04 FEB -9 PM 12: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

40124 ORANGE CIRCLE
LADY LAKE FL 32159

40124 ORANGE CIRCLE
LADY LAKE FL 32159

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

08/08/2002

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

35-2178672

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PST	FLECK, KANDAS M	40124 ORANGE CIRCLE	LADY LAKE FL 32159
			200027766622 01/29/04--01020--007 **300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FLECK, KANDAS M
40124 ORANGE CIRCLE
LADY LAKE FL 32159

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

Kandas M. Fleck
REGISTERED AGENT MUST SIGN

Date

1/25/04

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:

Kandas M. Fleck
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/25/04

CR20040 (7/03)

2012

**K.M. FLECK ENTERPRISES, INC.
40124 ORANGE CIRCLE
LADY LAKE, FLA. 32159**

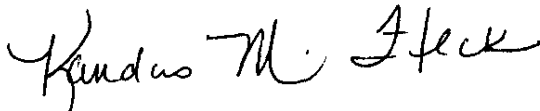
February 6, 2004

Subject: 2003 corporate annual report/uniform business report
Ref: P02000086528

**This letter is to inform you that I did not receive the notice(s) to file my 2003
Corporate Annual Report/Uniform Business Report. I have sent in \$300.00
But ask that you please waive the additional \$600.00 due to this reason.**

I appreciate your consideration on this matter.

Sincerely,

A handwritten signature in cursive script that reads "Kandas M. Fleck".

Kandas M. Fleck, Registered Agent