

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

03 NOV -6 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000123507**

1. Corporation Name

SUMTAL INC.

Principal Place of Business

119 SUN LN
PANAMA CITY BCH FL 32413

Mailing Address

119 SUN LN
PANAMA CITY BCH FL 32413

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 03



700021481927
11/06/03--01046--023 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

11/19/2002

5. FEI Number

90-0052419

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
P	SUMRELL, VICTORIA L	119 SUN LN	PANAMA CITY BCH FL 32413

8. Name and Address of Current Registered Agent

SUMRELL, VICTORIA L
119 SUN LN
PANAMA CITY BCH FL 32413

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

Victoria L Sumrell
REGISTERED AGENT MUST SIGN

Date

10/12/03

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:

Victoria L Sumrell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-12-03 850 814 2144

Daytime Phone #

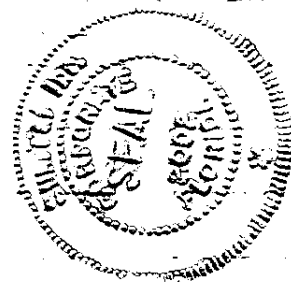
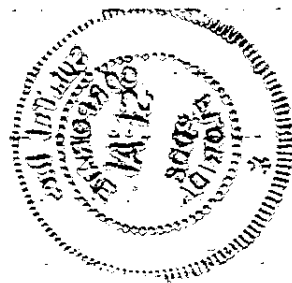
CR2E040 (7/03)

To Whom it may Concern:

I Victoria P Samuel, President &
CEO of SunTel Corp. did not,
or has not received and knowledge of
Notice Rnd to this Application for Revis-
tatement - Doc. # PD 2000 123507

Thank you.

Victoria P Samuel



To whom it may concern
This Letter was left out
of Paperwork for reinstatement

~~Done~~