

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000093089

Entity Name: FAS-KART, INC.

FILED  
Oct 25, 2009  
Secretary of State

## Current Principal Place of Business:

2615 SOUTHERN OAKS PLACE  
PLANT CITY, FL 33566

## New Principal Place of Business:

3505 CASON ROAD  
PLANT CITY, FL 33566

## Current Mailing Address:

2615 SOUTHERN OAKS PLACE  
PLANT CITY, FL 33566

## New Mailing Address:

3505 CASON ROAD  
PLANT CITY, FL 33566

FEI Number: 34-2001443

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MACHELL, STEPHEN  
2615 SOUTHERN OAKS PLACE  
PLANT CITY, FL 33566 US

## Name and Address of New Registered Agent:

MACHELL, STEPHEN  
3505 CASON ROAD  
PLANT CITY, FL 33566 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEPHEN R. MACHELL

10/25/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: MACHELL, STEPHEN  
Address: 2615 SOUTHERN OAKS PLACE  
City-St-Zip: PLANT CITY, FL 33566

Title: VP ( ) Delete  
Name: MACHELL, TYLER  
Address: 2615 SOUTHERN OAKS PLACE  
City-St-Zip: PLANT CITY, FL 33566

Title: VP ( ) Delete  
Name: MACHELL, JUSTIN  
Address: 4187 AUDUBON OAKS CIR APT 304  
City-St-Zip: LAKELAND, FL 33809

Title: T ( ) Delete  
Name: MACHELL, SANDRA  
Address: 2615 SOUTHERN OAKS PLACE  
City-St-Zip: PLANT CITY, FL 33566

Title: S ( ) Delete  
Name: MACHELL, SARAH  
Address: 2615 SOUTHERN OAKS PLACE  
City-St-Zip: PLANT CITY, FL 33566

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MACHELL, STEPHEN  
Address: 3505 CASON ROAD  
City-St-Zip: PLANT CITY, FL 33566

Title: VP (X) Change ( ) Addition  
Name: MACHELL, TYLER  
Address: 3505 CASON ROAD  
City-St-Zip: PLANT CITY, FL 33566

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: MACHELL, SANDRA  
Address: 3505 CASON ROAD  
City-St-Zip: PLANT CITY, FL 33566

Title: S (X) Change ( ) Addition  
Name: MACHELL, SARAH  
Address: 3505 CASON ROAD  
City-St-Zip: PLANT CITY, FL 33566

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEPHEN R. MACHELL

PD

10/25/2009

Electronic Signature of Signing Officer or Director

Date