

2007 FOR PROFIT CORPORATION REINSTATEMENT


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FILED

2007 FEB 26 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P05000042837

1. Entity Name
BALLYCASTLE MOTOR WORKS, INC.



Principal Place of Business Mailing Address

2940 N.W. COMMERCE PARK 2940 N.W. COMMERCE PARK
#4 #4
BOYNTON BEACH, FL 33426 US BOYNTON BEACH, FL 33426 US

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

550 BUSINESS PARKWAY BAY 8 / 13634 RHOE CIRCLE

Suite, Apt. #, etc. Suite, Apt. #, etc.

BAY 8

City & State City & State

ROYAL PALM BEACH, FL PALM BEACH GARDENS, FL

Zip County Zip County

33411 PALM BEACH 33410 PALM BEACH

02/26/07 01018 010 \$35.00



02152007 REIN-P CR2E098 (1/07)

FEI Number Applied For

72-1598822 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

TIGHE, PATRICK J ESQ.
7711 MILITARY TRAIL NORTH
PALM BEACH GARDENS, FL 33410

7. Name and Address of New Registered Agent

Name SAME
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Christopher M. Tighe DATE 2/21/07

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$300.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	P TIGHE, CHRISTOPHER M SR. 7711 MILITARY TRAIL NORTH PALM BEACH GARDENS, FL 33410 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	400090064674 03/02/07--01030--001 **285.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE Christopher M. Tighe Sr DATE 2/21/07 561
Signature and typed or printed name of signing officer or director 252-8099

See Attach RA form

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: BALLYCASTLE MOTOR WORKS INC.
2. The principal office address: 550 BUSINESS PARKWAY BAY #8
ROYAL PALM BEACH, FL. 3341
3. The mailing address (if different): 13634 RHONE CIRCLE
P.B.G. FL. 33410
4. Date of incorporation/qualification: _____ Document number: _____
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CHRISTOPHER M. TIGHE
13634 RHONE CIRCLE
P.B.G. FL 33410

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

(P.O. Box NOT acceptable)

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Christopher M. Tighe
(Signature of an officer or director)

CHRISTOPHER M. TIGHE
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314