

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000097876

1. Entity Name
LUG MAN, INC.



FILED

07 JAN -2 AM 11: 10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



12272006 REIN-P CR2E098 (11/05) **06-07**

4. FCI Number **20 3128571** Added For Not Accepted

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

2. Principal Place of Business 3409 W. DORCHESTER STREET TAMPA, FL 33611 US		3. Mailing Address 3409 W. DORCHESTER STREET TAMPA, FL 33611 US	
Suite, Apt. # etc.		Suite Apt # etc.	
City & State		City & State	
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent DOHERTY, STEPHEN J 3409 W. DORCHESTER STREET TAMPA, FL 33611		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 responsibility of the registered agent.

SIGNATURE *Stephen J. Doherty* **STEPHEN J. DOHERTY** **12/26/2006**
(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	P DOHERTY, STEPHEN J 3409 W. DORCHESTER STREET TAMPA, FL 33611 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	P DOHERTY, STEPHEN J. 1067 LARKSPUR LOOP JACKSONVILLE, FL 32259 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	600082912178 01/02/07--01054--012 **300.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ 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 a letter or other like empowered.

SIGNATURE: *Stephen J. Doherty* **STEPHEN J. DOHERTY** **12/26/2006 (904)254-5574**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*\$300.00 enclosed for 2007 + 2006 payment. OK 0993
NOT a Jan 1 late fee. Mailed on 12/27/06. (SOP)