

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P22151

1. Corporation Name

INDUSCO SOUTH, INC.

Principal Place of Business

1200 WEST HAMBURG STREET
BALTIMORE MD 21230

Mailing Address

1200 WEST HAMBURG STREET
BALTIMORE MD 21230

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/16/1988

5. FEI Number

59-2921119

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City, State, Zip
PD	ROSENBLATT, HOWARD	1200 W. HAMBURG STREET	BALTIMORE MD
VSD	EMANUEL, HORN	1200 W. HAMBURG STREET	BALTIMORE MD
AST	PROTZKO, GAYLE L	1200 W. HAMBURG STREET	BALTIMORE MD
D	PATRICH, JOHN	1200 W. HAMBURG STREET	BALTIMORE MD
D	DISALVO, CARL	1200 W HAMBURG ST	BALTIMORE MD
D	HEDRICK, JEFF	1200 W HAMBURG ST	BALTIMORE MD

8. Name and Address of Current Registered Agent

CAPITAL CONNECTION, INC.
226 W. GEORGIA STREET
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name STEPHEN A. HOULD

Street Address (P.O. Box Number is Not Acceptable)

444 THIRD STREET

Suite, Apt. #, Etc.

City NEPTUNE BEACH

State FL

Zip Code 32266

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.

Signature of
Registered Agent

Howard Rosenblatt
REGISTERED AGENT MUST SIGN

Date 11.12.98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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:

Howard Rosenblatt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11.12.98
Date

410.727.0645
Daytime Phone #

FILED

98 DEC -2 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT

CR25040 (9/99)