

2004 FOR PROFIT CORPORATIO REINSTATEMENT

DOCUMENT # P92000000527

1. Entity Name
SUB-TREK, INC.



FILED

04 DEC 23 PM 2:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



12022004 REIN-P CR2E098 (6/04)

Principal Place of Business Mailing Address
416 ALMANSA ST. N.E. 416 ALMANSA ST. N.E.
PALM BAY, FL 32907 US PALM BAY, FL 32907 US

2. Principal Place of Business 3. Mailing Address
416 ALMANSA ST. N.E. 416 ALMANSA ST. N.E.
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
PALM BAY, FLORIDA PALM BAY, FLORIDA
Zip Country Zip Country
32907 U.S.A. 32907 U.S.A.

4. FEI Number Applied For
59-3153368 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
CANITANO, JENNIFER A
416 ALMANSA ST NE
PALM BAY, FL 32907

7. Name and Address of New Registered Agent
Name N/A
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 JENNIFER A. CANITANO PRESIDENT 12-20-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$750.00
After January 1, 2005, Fee will be \$900.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CANITANO, JENNIFER A 416 ALMANSA ST NE PALM BAY, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	800043609238 <input type="checkbox"/> Change <input type="checkbox"/> Addition 12/23/04--01025--003 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Jennifer A. Canitano Jennifer A. Canitano 12-20-04 321-725-7645
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Re to: Sub-Trek, Inc.
416 Alvarado St NE.
Palm Bay, FL.
32907
F.E.I. # 59-3153368

Nov. 28, 2004

Dear Division of Corporations,

Due to the direct hit of two hurricanes to Palm Bay this year, I did not receive all of my mail. One of the pieces of mail I did not receive was my business renewal. Please accept my check for \$150. which would have been on time I believe if it wasn't for the hurricanes being two weeks apart.

Thank You,
Sincerely,
Jennifer A. Caniteno
President