

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

DIVISION OF CORPORATIONS

FILED

98 JUN 24 AM 9:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

P92000010836  
SUPEL CORP.

Principal Place of Business

Mailing Address

10 FAIRWAY DRIVE, #307  
Deerfield Beach, FL 33441

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

10 FAIRWAY DR, #307

Suite, Apt. #, etc.

City & State

Deerfield Beach  
33441

3. New Mailing Office Address, If Applicable

10 FAIRWAY DR, #307

Suite, Apt. #, etc.

City & State

Deerfield Beach  
33441

4. Date Incorporated or Qualified  
To Do Business in Florida

Dec 7, 1992

5. FEI Number

65-0394836

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
Pres	Richard G. Doggett	10 FAIRWAY DR, #307	Deerfield Beach FL 33441

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-06/25/98--01093--012  
\*\*\*1350.00 \*\*\*1350.00

REINSTATEMENT

94-98 TB

6/24

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Richard G. Doggett  
10 FAIRWAY DR, #307  
Deerfield Beach, FL 33441

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date

22 JUN 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:

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Signature]* Pres.  
Richard G. Doggett

Date

22 JUN 98 (954)  
480-9100