

PLEASE READ ALL INSTRUCTIONS BEFORE FILING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 993000034610

1. Corporation Name **STRATA-TECH, INC.**
4781 No. CONGRESS AVE.
P.M.B. 109
BOYNTON BEACH, FLORIDA 33426

Principal Place of Business Mailing Address
4781 No. Congress Ave. PMB109
Boynton Beach, FL. 33426

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

05/12/93

5. FEI Number

65-0414610

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

SEE THE APPLICANT'S FEE SCHEDULE
FOR FILING FEES AND COSTS.

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.	Dona Nichols-Jones	9407 Sun Pointe Dr.	Boynton Beach, FL. 33437
			700003062137--2 -12/06/99--01123--012 *****865.00 *****865.00
			700003062137--2 -12/06/99--01123--013 *****8.75 *****8.75

8. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

8. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.
City **Tallahassee** State **FL** Zip Code **32301**

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

Cynthia A. Donnell
REGISTERED AGENT MUST SIGN

Date

11/16/99

11. This corporation owes 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:

Dona Nichols Jones
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/08/99

(561)653-7588

Date

Daytime Phone #

FILED

99 NOV 23 PM 5:02

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

CR2001 (12/99)

STRATA- TECH, INC.
4781 N. CONGRESS AVE. PMB 109
BOYNTON BEACH, FL. 33426

November 8, 1999

Division of Corporations
attn: Mr. Tyrone Scott
409 Gaines Street
Tallahassee, Florida 32399

Mr. Scott:

I did not receive the 1995 notice. I am requesting a waiver of the late fees. I have enclosed the completed forms that you sent me along with payment in the amount of Eight Hundred Sixty-Five Dollars (\$865.00). Please use the enclosed completed airbill to return to us the Certificate of Status if possible (enclosed is a separate payment of \$8.75 for the Certificate). Thank you for your assistance.

Respectfully,

Dona Nichols-Jones
Dona Nichols-Jones