

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 DEC -9 AM 9:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000048249

1. Corporation Name

HI-TECH COOLING, INC.

Principal Place of Business

671 SW WHITEMERE DRIVE
PORT ST LUCIE FL 34984
US

Mailing Address

673 SW WHITEMERE DR
PORT ST LUCIE FL 34984
US

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

2. New Principal Office Address, If Applicable

673 SW Whitmore DR
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

673 SW Whitmore DR
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business In Florida

07/02/1993

5. FEI Number

65-0419410

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
D	SINGH, YOGNAUTH	1974 SW SCORPIO LANE	PORT ST LUCIE FL
D	SINGH, PARAMOUTRIE C	1974 S.W. BILTMORE ST. 1974 SW Scorpio Lane	PORT ST. LUCIE FL 34984
			800002372508--0 -12/15/97--01119--027 ****758.75 ****758.75

REINSTATEMENT

8. Name and Address of Current Registered Agent

SINGH, YOGNAUTH
1974 SW SCORPIO LANE
PORT ST. LUCIE FL 34984

9. Name and Address of New Registered Agent

Name Paramoutrie Singh
Street Address (P.O. Box Number is Not Acceptable)
1974 SW Scorpio Lane
Suite, Apt. #, Etc.

City Port St Lucie State FL Zip Code 34984

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 Paramoutrie Singh
REGISTERED AGENT MUST SIGN

Date 11/2/97

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: Paramoutrie Singh C Paramoutrie Singh 11/2/97 (SBI) 340-0543
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/97)