

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 SEP 27 AM 8:12

DOCUMENT # P93000048327

1. Corporation Name

BLUEFIELD TRADING COMPANY, INC.

Principal Place of Business

Mailing Address

1530 BROKEN ARROW TRAIL NORTH  
LAKELAND, FLORIDA 33813

REINSTATEMENT 98-99

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

2. New Principal Office Address, If Applicable

N/A

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

N/A

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

7/12/93

5. FEI Number

59-3202280

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
P	PETER URBAN	1530 BROKEN ARROW TRAIL N.	LAKELAND, FL 33813
S	BRENDA S. URBAN	1530 BROKEN ARROW TRAIL N.	LAKELAND, FL 33813
			100003000581--2 -09/29/99--01062--019 *****8.75 *****8.75
			100003000581--2 -09/29/99--01062--020 *****900.00 *****900.00

8. Name and Address of Current Registered Agent

PETER URBAN  
1530 BROKEN ARROW TRAIL NORTH  
LAKELAND, FL 33813

9. Name and Address of New Registered Agent

Name  
N/A  
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

*Peter Urban*

REGISTERED AGENT MUST SIGN

Date JULY 23, 1999

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 in this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Peter Urban*

PETER URBAN, PRESIDENT JULY 23, 1999

Date

407-248-2500

Daytime Phone #

CPRE08T (12/98)

AD