

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

99 SEP -1 PM 3:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P930000087486

1. Corporation Name

T.A.K. OF PASCO INC.
N99000015412

Principal Place of Business

7090 Ft King Rd
Zephyrhills, FL
33541

Mailing Address

4813 W Knights Griffin
Plant City FL
33565

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

2. New Principal Office Address, If Applicable

7090 Ft King Rd
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

4813 W Knights Griffin
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

12/21/93

5. FEI Number

593215442

Applied For

Not Applicable

City & State

Zephyrhills, FL
Zip 33541

City & State

Plant City, FL
Zip 33565

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	NORMA F. Donatiello	4813 W Knights Griffin	Plant City 33565
S	GAYNELL O. HALL	4105 N CORK RD.	Plant City 33565
VP	PAUL Donatiello	4813 W Knights Griffin	Plant City 33565

300002982923--8
-09/09/99--01076--015
***1050.00 ***1050.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MIKE HALL (TERRY)
4105 N CORK RD
Plant City, FL 335

Name NORMA F. Donatiello
Street Address (P.O. Box Number is Not Acceptable)
4813 W Knights Griffin Rd
Suite, Apt. #, Etc.
City Plant City State FL Zip Code 33565

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

Norma F. Donatiello
REGISTERED AGENT MUST SIGN

Date 3-1-99

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

(NO) = (see 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

Norma F. Donatiello
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Norma Donatiello
President 8/14/99
Date

817
782-4487
Daytime Phone #

KE

CR2E08 (12/98)