


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

CORPORATION
REINSTATEMENT

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

FILED

01 FEB 22 PM 12:03

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P94000028028

1. Corporation Name

Lighting Concepts & Systems Inc

2. Principal Office Address

3. Mailing Office Address

5665 S.E. LAMAY DR

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

STUART, FL

Zip

Country

Zip

Country

34997

USA

4. Date Incorporated or Qualified
To Do Business in Florida

4/15/94

5. FEI Number

Applied For

65-0482000

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Daniel Tillman

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

5665 S.E. LAMAY DR.

Suite, Apt. #, Etc.

City

STUART

State

FL

Zip Code

34997

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Daniel Tillman

Date 2/7/01

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P&D	Daniel Tillman	5665 S.E. LAMAY DR	STUART, FL 34997

10. 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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/01

Date

561-721-1704

Daytime Phone #

CR2E081 (9/99)

4
DAN TILLMAN c/o LC&S inc

292
5665 S.E. LAMAY DR.
STUART, FL 34997

Phone 561-221-1704
Fax 561-283-6696

February 07, 2001

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
re; REINSTATEMENT
attn; M. MILLIGAN

Per our conversation, please see attached reinstatement form and a check for \$150.00. I did not receive in the mail, the Corporate business report for 2000. Also in the year 2000, my corporation had no business activity. I was a salaried employee of South East Florida Lighting. Please accept my apology for any inconvenience, I may have caused. I await your response. If you have any questions, please do not hesitate to call. 561-221-1704 or (cellular) 561-308-3424.

Sincerely,


Dan Tillman