

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
REINSTATEMENT

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

APPROVED  
AND  
FILED

98 DEC 31 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000037703

1. Corporation Name

INNOVATIVE LIGHTING MFG. INC.

Principal Place of Business

Mailing Address

7605 PISSARRO DR. SUITE 107  
ORLANDO, FL 32819

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

2. New Principal Office Address, If Applicable  
7605 PISSARRO DR.

Suite, Apt. #, etc. 107

City & State ORLANDO, FL

Zip 32819 Country ORANGE

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip Country

4. Date Incorporated or Qualified  
To Do Business in Florida

5/16/94

5. FEI Number

65-0494918

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
PRES.	THOMAS J. ARMOUR	7605 PISSARRO DR #107	ORLANDO, FL 32819

400002731264--0  
-01/06/98--01005--006  
\*\*\*\*758.75 \*\*\*\*758.75

12/31

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name THOMAS J. ARMOUR  
Street Address (P.O. Box Number is Not Acceptable)  
7605 PISSARRO DR.  
Suite, Apt. #, Etc. 107  
City ORLANDO  
State FL Zip Code 32819

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

REGISTERED AGENT MUST SIGN

Date 12/29/98

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/29/98 407-421-6551

CR2E040 (1/98)



**Innovative Lighting Mfg. Inc.**

7605 PISSARRO DRIVE SUITE 107 ORLANDO, FL 32819  
PHONE: 407-354-4415 FAX: 407-354-4619

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Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

December 29 1998

RE: P94000037703

Dear Sirs;

Please reinstate my corporation. I sent in the corporation annual report in April of 1995 *Please see attached*. I was unaware that you did not receive the form. When I called in on the corporation number in Tallahassee the gentleman that I talked with said to pay the \$750.00 and you would reinstate with out the other penalty do to the loss of the form. Thank you for your time and consideration.

Sincerely;

A handwritten signature in black ink, appearing to be 'T. Armour', with a long, sweeping underline that extends across the page.

Thomas J. Armour  
President