

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

00 JAN 26 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000042913**

1. Corporation Name

SHIV-SHAKTI OF CHATTAHOOCHEE, INC.

Principal Place of Business

Mailing Address

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

2. New Principal Office Address, If Applicable

720 LINCOLN DR

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

720 LINCOLN DR

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

6/3/94

5. FEI Number

59-3248961

Applied For

Not Applicable

City & State

CHATTAHOOCHEE, FL

City & State

CHATTAHOOCHEE, FL

Zip

32324

Country

USA

Zip

32324

Country

USA

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	PRAFUL PANCHAL	516 W. WASHINGTON	CHATTAHOOCHEE FL 32324
VP	PRAVIN MEHTA	2390 Lawrenceville Hwy Apt. A Decatur, GA 30033	ATLANTA, GA DECATUR
S	PRAVIN MEHTA	2390 LAWRENCEVILLE HWY APTA, DECATUR, GA 30033	ATLANTA, GA DECATUR
			400003119714--4 -02/01/00--01133--014 ***1050.00 ***1050.00
			LS

8. Name and Address of Current Registered Agent

**ROHIT PATEL
5705 COUNTRYSIDE DR
TALLAHASSEE, FL 32311**

9. Name and Address of New Registered Agent

Name

PRAFUL PANCHAL

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

516 W. WASHINGTON

Suite, Apt. #, Etc.

City

CHATTAHOOCHEE

State

FL

Zip Code

32324

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

A. Panchal

REGISTERED AGENT MUST SIGN

Date

12/2/99

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

SIGNATURE:

A. Panchal

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRAFUL PANCHAL

Date

12/2/99 850-663-4802

Daytime Phone #