

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 OCT 25 PM 12:21

DOCUMENT # **P94000053045**

1. Corporation Name

ELLIOTT HOLDINGS INC.

Principal Place of Business

Mailing Address

REINSTATEMENT

87-99

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

2. New Principal Office Address, If Applicable

91 HARNESWORTH CRES

Suite, Apt. #, etc.

WATERDOWN ONTARIO

City & State

CANADA

Zip

Country

LOR 2H6

3. New Mailing Office Address, If Applicable

91 HARNESWORTH CRES

Suite, Apt. #, etc.

City & State

WATERDOWN ONTARIO

Zip

Country

LOR 2H6

CANADA

4. Date Incorporated or Qualified
To Do Business in Florida

7/18/94

5. FEI Number

65-0511856

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
DIR	BILL ELLIOTT	91 HARNESWORTH CRES	WATERDOWN ONTARIO CANADA LOR 2H6

500003033155--2
-11/02/99-01098-027
*****1050.00 ***1050.00**

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name **Robert E. Murdoch**

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

790 East Broward Boulevard

Suite, Apt. #, Etc.

Suite 400

City

Fort Lauderdale

State

FL

Zip Code

33301

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

Robert E. Murdoch

REGISTERED AGENT MUST SIGN

Date **10-22-99**

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:

Bill Elliott
BILL ELLIOTT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept 27/99
Date

905 690-2541
Daytime Phone #

CR2001 (12/98)