

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 OCT 23 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA4000059995

1. Corporation Name

New TriState Automotive & Electric Inc

10/23/09--01024--009 **450.00

200162160332
10/23/09--01024--009 **450.00
CR2E081(12/08)

2. Principal Office Address - No P.O. Box #

1033 N. Congress Avenue

3. Mailing Office Address

1033 N. Congress Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

West Palm Beach, Fl

City & State

west Palm Beach, Fl

Zip

33409

Country

Zip

33409

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/15/1994

5. FEI Number
650510868

Applied For

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

Michael Forbes

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

Suite, Apt. #, Etc.

2410 Embassy Dr

City

west Palm Beach, Fl

State
FL

Zip Code
33401

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Michael Forbes
REGISTERED AGENT MUST SIGN

Date 10-19-2009

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
pres	Rendel Forbes	2410 Embassy Dr	West Palm Beach, Fl 33401
sec	Dahlia Foorbes	2410 Embassy Dr	west Palm Beach, Fl 33401
vp	Michael Forbes	2410 Embassy Dr	west Palm Beach, Fl 33401

REINSTATEMENT 07-09

2010/26

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 contained in Chapter 119, 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:

X Rendel Forbes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-20-09

Daytime Phone #