PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR



P94000067419 DOCUMENT

1. Corporation Name

SERVICE TECHNOLOGIES INCORPORATED

Principal Place of Business

Mailing Address

8810 NW 77TH COURT APT. 167 TAMARAC FL 33321

8810 NW 77TH COURT APT. 167

TAMARAC FL 33321



NOV -2 PM 12: 00

SECRETARY OF STATE TALLAHASSEE FLORIDA



If above a	ddresses are incorrect in any way, line thro	ough incorrect inf	ormation and enter of	correction below.				
				Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida 09/12/1994		
			J. HEMZNEWAY COR		5. FEI Number		Applied For	
City & State	9	City & State	ر بر	7		65-0526039	Not Applicable	
<u> 3</u> 30	63 Broward	MA19A 3306	Country	ward	6. CERTIFICATE	OF STATUS DESIRED [\$8.75	Additional Fee required a Certificate of Status	
7. Names a	and Street Addresses of Each Officer and/	or Director (Flor	ida nonprofit corpora	tions must list at lea				
Title(s) 1	Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director 3		City / State / Zip			
D	KANA, NICKEY		8810 NW 77TH COURT APT. 167		TAMARAC FL 33321			
P	BOSTICK, CHARLES		8810 NW 77TH COURT APT. 167		TAMARAC FL 33321			
			•			<u>.</u>		
					41	00003473	2046	
		(000034732046 -11/21/0001097022 ****150.00 ****150.00			
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent			
KANA MICKEY				Name KANA W.I.C.KE.Y Street Address (P.O. Box Number is Not Acceptable)				
KANA, NICKEY 8810 NW 77TH COURT APT. 167				153 W HEMINGWAY CIRCLE				
	RAC FL 33321		Suite, Apt. #, Etc) =	ĺ		
				MARGA	ate	State FL	Zip Code 3306_3	
10. I, being	g appointed the registered agent of the abo	ove named corpo	ration, am familiar w	ith and acceptible o	bligations of Secti		_	
Signature o Registered	Agent Agent	GISTERED AGI	ENT MUST SIGN	加州社		Date 10~3/	-00	
11, I certify	that I am an officer of director or the recei	ver or trustee em	powered to execute	this application as p	provided for in cha	opter 607 or 617, F.S. I further	certify that when filing	
this rein	nstatement application, the reason for dissony the corporation have been paid and the application is true and accurate, and my signal.	olution has been names of individ	eliminated, the corporate uals listed on this for	orate name satisfies m do not qualify for	the requirements an exemption un	of section 607.0401 or 617.04	01, F.S., that all tees	





8772 N.M. 57th-Surface - Famoric - Ft - 53651 • Tel: 954-720-7121 • Fax 954-720-7267 • E-mail: service tech@cvinecom

October 30, 2000

Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, FL 32314-6327

To Whom It May Concern:

This letter is in regards to your "Notice of Administrative Dissolution or Revocation" that was received in our office. This is to inform you that this company as not been closed. We, however, did not receive the annual report for year 2000 as our company relocated.

I am enclosing a check for \$150.00 to reinstate our Division of Corporations and should you have any questions, please do not hesitate to call me at (954) 720-7121.

Sincerely,

Nickey L. Kana Vice President Service Technologies, Inc