PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

OCL	INAE	=NIT	#	P9500000143	i
	ΝΝΙΣ	_IN.I	·. #*.		J

1. Corporation Name

PEAK PRECISION, INC.

FILED FINETARY OF STAIL FISION OF CORPORATION

00 OCT 18 PM 2:35

IN STATE OF SATTI US IN shore and Address of Current Registered Agent In Surface Prince In Surface Prince	Principal Place of Business Mailing Ad				ress			- 	A (ALEN BING) RUGIN AUGIN ABING AANG ATTE	KAKA BIBRU MIBI MBI 1881	
If above addresses are incorrect in any way, line through incorrect information and onter correction below. If above addresses are incorrect in any way, line through incorrect information and onter correction below. If above addresses are incorrect in any way, line through incorrect information and onter correction below. If above addresses are incorrect in any way, line through incorrect information and onter correction below. If a bove addresses are incorrect in any way, line through incorrect information and onter correction below. If a bove addresses are incorrect in any way, line through incorrect information and onter correction below. If a bove addresses are incorrect in any way, line through incorrect information and onter correction below. If a bove addresses are incorrect in any way, line through incorrect information and onter correction below. If a bove addresses are incorrect in any way, line through incorrect information and onter correction below. If a bove addresses are incorrect in any way, line through incorrect information and onter correction below. If a bove addresses are incorrect in any way, line through incorrect information and and onter correction below. If a bove and and addresses of Each Officer and for Director (Florida nonprofit corporations must list at base 3 directors) If a bove and street Addresses of Each Officer and for Director (State Addresses of Each Officer and for Director (Florida nonprofit corporations must list at base 3 directors) If a bove and Addresses of Each Officer and for Director (Florida nonprofit and base) If a bove and Addresses of Each Officer and for Director (Florida nonprofit and base) If a bove and Addresses of Each Officer and for Director (Florida nonprofit and base) If a bove and Addresses of Each Officer and for Each Officer (Florida nonprofit and base) If a bove and Addresses of Each	700 10011 0111										
2. Now Principal Office Address, if Applicable Suite, Apt. #, etc. Su		L 32771							2 18:5: \$31: B4:: B4:: BB:: B4:: B4:: B4:: B4:: B4	1011 41404 1641 1101 1441	
2. Now Principal Office Address, if Applicable Suite, Apt. #, etc. Su	05			US		THE REAL PROPERTY.	PATEMIENT	\mathcal{C}			
2. Now Principal Office Address, if Applicable Suite, Apt. #, etc. Su	If above as	idrosses are	incorrect in any way, line thro	ough incorrect in	nformation a	nd enter o	correction below.	REIND	HHE TARESON		
Suite, Apt. #, etc. Suite, Ap									orated or Qualified		
City & State Country Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Street Address of Each Officer and/or Director A City / State Zip City / State Zip P E JOHN CROUCH 382 WINSFORD COURT 174 V; A Di Este Terrace #204 Lake Mary FL 32746 Lake Mary FL 32746 STEVEN Crouch 174 Villa Di Este Terrace #204 Lake Mary FL 32746 VP Steven Crouch 2307 Howard Dr. Orlando, FL 32803 FEI JUTY Street Address (P.O. Box Numbers Not Accessible) 4 4 10 4 5 - 9 10.766-99 - 91039 - 908 HEATHROW FL 32746 City State City / State Zip Code FL Street Address (P.O. Box Numbers Not Accessible) 4 4 10 4 5 - 9 Street Address (P.O. Box Numbers Not Accessible) 4 4 10 4 5 - 9 Street Address (P.O. Box Numbers Not Accessible) 4 4 10 4 5 - 9 HEATHROW FL 32746 City State City / State Zip Code FL St	2. 113.1 1 111.0 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 121.1 12				18.			To Do Business in Florida 01/06/1995			
Zip Country Zip Country Zip Country CERTIFICATE OF STATUS DESIRED Street Address of Status Desired of Status Name and Struet Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officer and/or Directors Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) P E JOHN CROUCH See WINSPORD COURT 174 Villa Di Este Terrace #204 Lake Mary FL 32746 Lake Mary FL 32746 STEVEN Crouch 174 Villa Di Este Terrace #204 STEVEN Crouch STEVEN Crouch 2307 Howard Dr. Orlando, FL 32803 B. Name and Address of Current Registered Agent Name Street Address (P.O. Box Numbers Mary 100 Markets) Name Street Address of P.O. Box Numbers Mary 100 Markets P.O. DI Mark	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. FEI Number	· · · · · · · · · · · · · · · · · · ·	Applied For	
The Country Zip Country Certificate of Status Desired 7. Names and Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) 7. Names and Street Address of Each Officer and/or Director Street Address of Each Officer and/or Director 7. Names and Street Address of Each Officer and/or Director A 7. Names and Street Address of Each Officer and/or Director 8. Name and Address of Each Officer and/or Director 8. Name and Address of Corough 174 Villa Director 174 Villa Director 8. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent 8. Name 8. Name and Address of New Registered Agent 8. Name 8. Name and Address of New Registered Agent 8. Name 8. Name 8. Name and Address of New Registered Agent 8. Name 8. Nam	City & State)		City & State				59-3299040 Not Applicable		Not Applicable	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) 8. Name of Officers and/or Director 3 Street Address of Each Officer and/or Director 4 A City / State / Zip P E JOHN CROUCH 382 WINSFORD COURT 174 V;			I Countrie								
Title(s) 2 Name of Officers and/or Directors 3 Street Address of Each Officer and/or Directors 4 City / State / Zip P E JOHN CROUCH 382 WINSTORD COURT 174 V; A Di Este Terrace # 204 Lake Mary, FL 32746 VP David Crouch 174 Villa Di Este Terrace Apt. 212 Lake Mary, FL 32746 S/T Christiae Crouch 174 Villa Di Este Terrace #204 Lake Mary, FL 32746 VP Steven Crouch 2307 Howard Dr. Orlando, FL 32803 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name E JOHN CROUCH -382 WINSTORD COURT 174 Villa Di Este Terrace #204 Stute; Apt. #, Etc. 10.726, DD -01833 -008 HEATHROW FL 32746 Lake Mary, FL 32746 10. 1, being appointed the registered agent of the above pamed corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent PREGISTERED WAST SIGN 11. Lordfly that I am an officer or director or the receiver or truspers appropriated, the corporate name satisfies the requirements of section 607.0401, F.S., that all fees	Zip		Country	Ziμ	Zip Country						
Title(s) 2 and/or Directors 3 Officer and/or Director 4 City / State / Zip P E JOHN CROUCH 362 WINSFORD COURT 174 V; a Di Este Terrace # 204 Lake Mary, FL 32746 Lake Mary, FL 32746 Lake Mary, FL 32746 Lake Mary, FL 32746 VP Steven Crouch 23 07 Howard Dr. Crouch 3 Name and Address of New Registered Agent Name E JOHN CROUCH 382 WINSFORD COURT 174 V; a Di Este Terrace #204 Lake Mary, FL 32746 VP Steven Crouch 23 07 Howard Dr. Crouch Street Address of New Registered Agent Name E JOHN CROUCH 382 WINSFORD COURT 174 V; a Di Este Terrace #204 Street Address (P.O. Box Numbered Normalish Agent) Name Street Address (P.O. Box Numbered Normalish Agent) Street Address (P.O. Box Numbered Normalish Agent) 10. I, being appointed the registered agent of the above pamed corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent 11. Lordily that I am an officer or diractor 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 filling this registered Agent 11. Lordily that I am an officer or diractor 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 filling this registered agent in 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	7. Names a	and Street Ad	dresses of Each Officer and/	or Director (Flo	rida nonprof	fit corpora	tions must list at le	ast 3 directors)			
P E JOHN CROUCH 382 WINSFORD COURT 174 V; A Di Este Terrace #204 Lake Mary, FL 32746 S/T Christine Crouch 174 Villa Di Este Terrace Apt. 212 Lake Mary, FL 32746 VP Steven Crouch 2307 Howard Dr. Orlando, FL 32803 8. Name and Address of Current Registered Agent P JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace #204 Lake Mary, FL 32746 Street Address of New Registered Agent 174 Villa Di Este Terrace #205 Lake Mary, FL 32746 Street Address of New Registered Agent 174 Villa Di Este Terrace #205 Suite, Apt. #, Etc. 10. Location Total Court 10. Locat	T11. (c)				Street Address of Each			City / State / Zip			
P David Crouch 174 Villa Di Este Terrace #204 Lake Mary, FL 32746 S/T Christine Crouch 174 Villa Di Este Terrace Apt. 212 Lake Mary FL 32746 VP Steven Crouch 2307 Howard Dr. Orlando, FL 32803 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace #201 Street Address (P.O. Box Number is Not Acceptable) 4 4 10 4 5 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9								4			
PP David Crouch 174 Villa Di Este Terrace #204 Lake Mary, FL 32746 S/T Christine Crouch 174 Villa Di Este Terrace Apt. 212 Lake Mary FL 32746 VP Steven Crouch 2307 Howard Dr. Orlando, FL 32803 8. Name and Address of Current Registered Agent Name E JOHN CROUCH -382 WINSFORD COURT 174 Villa Di Este Terrace #201 Street Address (P.O. Box Number of Name) 10/28/90 10/39 10/39 10/39 HEATHROW FL 32748 Lake Mary, FL 32 746 To I, being appointed the registered agent of the above pamed corporation, an familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Registered Agent Name and accept the obligations of Section 607.0505, F.S. 11. Leetlify 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 rejectatement 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	Р	E JOHN C	ROUCH		382 WINSFORD COURT						
S/T Christine Crouch 174 Villa Di Este Terrace #201 Lake Mary, FL 32746 VP Steven Crouch 2307 Howard Dr. Orlando, FL 32803 8. Name and Address of Current Registered Agent Name E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace #201 Street Address (P.O. Box Number is Not Accompable) 4 4 010 4 5 9 9 10/26/40 010 45 9 9 10/26/40 010 45 9 9 10/26/40 010 45 9 9 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26	,	E dorité discour							nce #204 Lake Mary, FL 32746		
S/T Christine Crouch 174 Villa Di Este Terrace #201 Lake Mary, FL 32746 VP Steven Crouch 2307 Howard Dr. Orlando, FL 32803 8. Name and Address of Current Registered Agent Name E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace #201 Street Address (P.O. Box Number is Not Accompable) 4 4 010 4 5 9 9 10/26/40 010 45 9 9 10/26/40 010 45 9 9 10/26/40 010 45 9 9 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26/40 10/26		101		60.4.34	(.)/. X	T-1-50	1.4.212				
8. Name and Address of Current Registered Agent 8. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4 4 10 4 5 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	vp David Crouch				114 VIIIa DI ESTE IETTALE APT.212 LAK			Lake Mary FL	. 32146		
8. Name and Address of Current Registered Agent 8. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4 4 10 4 5 9 10 7 6 17 6 10 7 6 17 F.S. I further certify that I am an officer or director or the register MUST SIGN 11. 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 filling 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	01-	41.	sting Comma	L				19.4	1 4 00 -1		
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 4 4 1 1 4 5 - 9 HEATHROW-FL 32746 Lake Mary, FL 32 746 Suite, Apl-#, Etc. 10, 26, 00 1033 003 City State Zip Code FL Zip Code 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 11. 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	S/T Christiae Lrouch				174 Villa Di Este Ter			race #201	Lake Mary, FL	32746	
E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace \$20 HEATHROW FL 32746 City State To receiver of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent 1. 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	VP	VP Steven Crouch				2307 Howard Dr.			Orlando, FL	32803	
E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace \$20 HEATHROW FL 32746 City State To receiver of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent 1. 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									\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace \$20 HEATHROW FL 32746 City State To receiver of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent 1. 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					<u> </u>				12/02		
E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace \$20 HEATHROW FL 32746 City State To receiver of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent 1. 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)								The loles		
E JOHN CROUCH 382 WINSFORD COURT 174 Villa Di Este Terrace \$201 HEATHROW FL 32746 City State Zip Code To / 16 / 00 To / 10 / 16 / 00 10 / 16 / 00 11 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		8. Nan	ne and Address of Current	Registered Ag	ent	ıt 9. Nam			and Address of New Registered Agent		
-382 WINSFORD COURT 174 VIII Di Este Terrace \$20 Suite; Apt.#, Etc. 10./26./00 -01033 - 008 HEATHROW FL 32746						Name					
-382 WINSFORD COURT 174 VIII Di Este Terrace \$20 Suite; Apt.#, Etc. 10./26./00 -01033 - 008 HEATHROW FL 32746	E JOH	N CROUCH	1				Street Address	P O Boy Number	is Not Acceptable)	9	
HEATHROW FL 32746 Lake Mary, FL. 32,746 Suite, Apt.#, Etc. ****750.00 *****750.00 *****750.00 City State FL 10. I, being appointed the registered agent of the above pamed corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. 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 filling 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	-38 2 W	INSFORD C	COURT 174 Vil	la Di Es	te Terra	ce #20	H		70003344UU 10738700011	1453 	
10. I, being appointed the registered agent of the above pamed corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. 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											
10. I, being appointed the registered agent of the above pamed corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. 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 filling 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											
Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. 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 filling 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							City				
REGISTERED AGENT MUST SIGN 11. 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 filling 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	10. I, being	g appointed th	ne registered agent of the abo	ove named corp	oration, am	familiar w	ith and accept the	obligations of Sect	ion 607.0505, F.S.		
REGISTERED AGENT MUST SIGN 11. 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	Signature of SIZNAZIRE REQUIRED 4/4/22										
11. 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	Registered Agent										
this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,0401, r.S., that all lees											
this remainder application, the restaurance of the information indicated	this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607,0401 or 617,0401, r.S., that all lees										

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.