

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 JAN 31 PM 3:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000008997

1. Corporation Name

DAN'S TINT SHOP OF FORT WALTON BEACH, INC.

Principal Place of Business

118 4TH STREET S.E.  
FORT WALTON BEACH, FL  
32548

Mailing Address

807 AZALEA DRIVE  
FORT WALTON BEACH, FL  
32548

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City &amp; State

Zip

Country

REINSTATEMENT

97-0

4. Date Incorporated or Qualified  
To Do Business in Florida

1/30/1995

5. FEI Number

59-3360066

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)

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
D	CLEM, DANIEL H.	807 AZALEA DRIVE	FORT WALTON BEACH, FL 32548

500003129765--3  
-02/09/00--01077--015  
\*\*\*1200.00 \*\*\*1200.00

8. Name and Address of Current Registered Agent

CLEM, DANIEL H.  
807 AZALEA DRIVE  
FORT WALTON BEACH, FL 32548

9. Name and Address of New Registered Agent

Name

DANIEL H. CLEM

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

118 4TH STREET S.E.

Suite, Apt. #, Etc.

FORT WALTON BEACH

City

FT WALTON BEACH

State

FL

Zip Code

32548

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

Date

1/25/00

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:

DANIEL H. CLEM

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/00

Date

850-244-3044

Daytime Phone #

KE