

20 P. 7101

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED MAR 13 PM 3:25 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # 105000005306 945000037608					
1. Corporation Name PCK Enterprises, Inc.					
Principal Place of Business Mailing Address 6921 Pine Island Rd Tamara, FL 33331					
If above addresses are incorrect in any way, line # rough incorrect information and enter correction below.					
2. New Principal Office Address, if Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Address, if Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida May 11, 1995 5. FEI Number 65-0579216 6. CERTIFICATE OF STATUS DESIRED ☐	
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		
Pres	Kevin Young	10017 Winding Lake Rd	Surprise, FL 33351	800002450978-2	
				03/17/98 -- 01025 -- 023	
				****900.00 ****900.00	
REINSTATEMENT 97-98					
SL 3-13-98					
8. Name and Address of Current Registered Agent Peter Young 9948 NOD HILL CT Sunrise, FL 33351			9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0805, F.S. Signature of Registered Agent: <u>Peter Young</u> Date: <u>3-11-98</u> REGISTERED AGENT MUST SIGN					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(h), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(h) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered in executing 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., and that all fees owed by the corporation have been paid. 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: <u>Kevin Young</u> 3-11-98 C					