

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000076717

1. Corporation Name

SURF TECH INTERNATIONAL, INC.

Principal Place of Business

1705 CATTLEMEN RD N-13
SARASOTA FL 34232

Mailing Address

1705 CATTLEMEN RD N-13
SARASOTA FL 34232

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.

1751 Cattlemen Road

City & State
Sarasota FL

Zip
34232

Country
USA

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

1751 Cattlemen Road

City & State
Sarasota FL

Zip
34232

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

10/02/1995

5. FEI Number

65-0622768

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
D/V	REED, WILLIAM C	1705 CATTLEMEN RD N-13 1751 Cattlemen Road	SARASOTA FL 34232
D/P	LEWIS, RONALD W	1705 CATTLEMEN RD N-13 1751 Cattlemen Road	SARASOTA FL 34232
D	RYDELL, JEROME G	1705 CATTLEMEN RD N-13 1751 Cattlemen Road	SARASOTA FL 34232
D/S/T	REED, CLAUDIA D.	1751 Cattlemen Road	SARASOTA, FL 34232
			300002381839-7 -12/24/97-01038-028 *****8.75 *****8.75
			300002381839-7 -12/24/97-01038-029 *****750.00 *****750.00

8. Name and Address of Current Registered Agent

RUTTER, GORHAM JR
2510 E JACKSON ST
ORLANDO FL 32803

9. Name and Address of New Registered Agent

Name
RUTTER, GORHAM Jr.
Street Address (P.O. Box Number is Not Acceptable)
283 N. Northlake Blvd.
Suite, Apt. #, Etc.
Suite 111
City
Altamonte Springs
State
FL
Zip Code
32701

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

[Signature]

THE REGISTERED AGENT MUST SIGN

Date 12/17/97

11. This corporation owes or has paid 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:

[Signature]

William C. Reed

10/16/97

(941) 399-6077

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director/Vice-Pres.

Date

Daytime Phone #

CP25040 (9/97)