

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 # P95000086204

1. Corporation Name

Lokit Investment Inc.

Principal Place of Business

2512 Orange Avenue
Fort Pierce, FL 34947

Mailing Address

W97-26408
Bharat R. Shah
1885 W. Commercial Blvd.
Suite 190
Ft. Lauderdale, FL 33309

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

2. New Principal Office Address, If Applicable

N/A

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

N/A

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/09/95

5. FEI Number

65-0623862

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

Pres. Bharat R. Shah

1831 W. Eagle Trace Blvd. Coral Springs, FL 33071

V.Pres. Sunita B. Shah

1831 W. Eagle Trace Blvd. Coral Springs, FL 33071

3000002363283--6
-12/04/97-01090-015
****923.75 ****923.75

8. Name and Address of Current Registered Agent

Bharat R. Shah

1831 W. Eagle trace Blvd.
Coral springs, FL 33071

9. Name and Address of New Registered Agent

Name

N/A

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

Suite, Apt. #, Etc.

City

State

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

Bharat R. Shah
REGISTERED AGENT MUST SIGN

Date 11/14/97

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 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:

Bharat R. Shah
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Bharat R. Shah

11/14/97

Date

(954) 776-7604

Daytime Phone #