

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 24 AM 11:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000018662

1. Corporation Name

BIG TUNA INC.

Principal Place of Business

58 - 16TH ST.  
APALACHICOLA FL 32320

Mailing Address

58 - 16TH ST.  
APALACHICOLA FL 32320



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

02/27/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3365054

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
<i>RD</i>	ROHE, RICHARD L.	58-16TH STREET <i>street</i>	APALACHICOLA FL 32320 <i>32320</i>
<i>S</i>	Rohe, Laura R.	58 - 16 <sup>th</sup> Street	Apalachicola, FL 32320
			000008575320
			10/24/02--01095--010 **158.75
			<i>PR 10/28</i>

8. Name and Address of Current Registered Agent

ROHE HERRON, VIRGINIA W  
58 - 16TH ST.  
APALACHICOLA FL 32320

9. Name and Address of New Registered Agent

Name *Rohe, Richard L.*  
Street Address (P.O. Box Number is Not Acceptable)  
*58 - 16<sup>th</sup> Street*  
Suite, Apt. #, Etc.  
City *Apalachicola* State **FL** Zip Code *32320*

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. or 617.0505, F.S.

Signature of  
Registered Agent

*Richard L. Rohe*  
**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date

*10/21/02*

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 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:

*Richard L. Rohe*  
**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

*10/21/02*

Daytime Phone #

CR2E040 (8/02)

Big Tuna Inc.  
58 – 16<sup>th</sup> Street  
Apalachicola, FL 32320  
(850) 653-9854

October 21, 2002

Florida Dept of State  
Division of Corporations  
Annual Report/Reinstatement Section  
PO Box 6327  
Tallahassee, FL 32314-6327


To Whom it May Concern:

BTI did not receive the previous two notices concerning filing of a corporation annual report/uniform business report.

Please accept our \$150 fee plus \$8.75 to have a certificate of status sent to us at 58 – 16<sup>th</sup> Street, Apalachicola, FL 32320.

Thank you for your help in this matter.

Sincerely,

  
Richard L. Rohe  
President