

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

AND
FILED

00 MAY 22 PM 12:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000022312**

1. Corporation Name

Enviro-Air systems

2. Principal Office Address

2695 N. Military Trail

Suite, Apt. #, etc.

(6)

City & State

W. P. B., FL.

Zip

33409

Country

palm beach

3. Mailing Office Address

2695 N. Military Tr.

Suite, Apt. #, etc.

6

City & State

W. P. B. FL

Zip

33409

Country

Palm beach

4. Date Incorporated or Qualified
To Do Business in Florida

March 12, 1996

5. FEI Number

650647901

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Allen R. Tyler

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

2695 N. Military Tr.

Suite, Apt. #, Etc.

#6

City

W. P. B.

State

FL

Zip Code

33409

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Allen R. Tyler

Date **5-18-2000**

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Warren R. Tyler	2695 N. Military Tr. #6	W. P. B. FL 33409
Secretary	Wilda G. Tyler	~ ~ ~	~ ~ ~
Treasurer	Wilda G. Tyler	~ ~ ~	~ ~ ~

REINSTATEMENT **96-00**
ADN

10. 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:

Allen R. Tyler

Allen R. Tyler

5-18-2000

561-2420490

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/99)