

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 NOV 20 AM 11:05

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P96000028898**

1. Corporation Name

MOHAN ENGINEERING, INC.

Principal Place of Business	Mailing Address
13700 58TH ST N SUITE 204 CLEARWATER FL 33760 US	13700 58TH ST N SUITE 204 CLEARWATER FL 33760 US

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/01/1996	
City & State		City & State		5. FEI Number	
Zip		Country		59-3379190	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	



REINSTATEMENT 03

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
P/V/S/T	MOHAN, GEORGE EDMUND IV	2662 N. MCMULLEN BOOTH RD APT 42	CLEARWATER FL 33761

600024867146
 11/20/03--01006--002 **158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MOHAN, GEORGE EDMUND IV
 2662 N. MCMULLEN BOOTH RD
 APT 4211
 CLEARWATER FL 33761

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 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/11/03

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/11/03

707-555-9111

CR2E040 (7/03)



MOHAN ENGINEERING, INC.
Consulting Structural Engineers

November 12, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Reinstatement

Dear Sir or Madam:

Attached is a completed "Application for Reinstatement" with an application fee of \$158.75, including an additional fee of \$8.75 for a Certificate of Status. We had not previously received an annual report/uniform business report for the 2003 calendar year.

Sincerely,
Mohan Engineering, Inc.

A handwritten signature in black ink, appearing to read "G. Mohan", is written over the typed name "Mohan Engineering, Inc.".

George E. Mohan, P.E.
President

attachment