PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
00 MAR 24 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000041283

1. Corporation Name

HYATT SMALL ENGINES, INC.

Principal Place of Business	Mailing Address
~~929 MAIN ST~~ ~~SAFETY HARBOR FL 34677~~	~~323 MAIN ST~~ ~~SAFETY HARBOR FL 34677~~

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

REINSTATEMENT 99-00

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
3691 State Road 580	12740 Kent Grove Dr.
Suite, Apt. #, etc.: Unit A	Suite, Apt. #, etc.:
City & State: Oldsmar, FL	City & State: Springhill, FL
Zip: 34677 Country: USA	Zip: 34610 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 05/08/1996

5. FEI Number: 59-3385976 ☐ 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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	HYATT, DANIEL R	3691 STATE RD 580 UNIT D	OLDSMAR FL 34677

100003226051--4
-04727700--01012--003
****900.00 ****900.00
LS

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
FINCH, JOHN K 323 MAIN ST SAFETY HARBOR FL 34677	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (8/99)

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 REQUIRED — Date: 3-22-00
REGISTERED AGENT MUST SIGN

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 — "Daniel R. Hyatt, President" — 3-22-00 — (813) 855-8132
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #

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