

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

98 JUL 24 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000062810

1. Corporation Name

BISHOP, INC.

Principal Place of Business

Mailing Address

c/o G. Edward Clement, Esq.
308 East Fifth Avenue
Mount Dora, FL 32757

c/o G. Edward Clement, Esq.
308 East Fifth Avenue
Mount Dora, FL 32757

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

July 26, 1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3521768

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)

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
1	2	3	4
D, P, VP, S/T	Kamil Gowni	1348 Valley Pine Circle	Apopka, FL 32712

REINSTATEMENT

97-98

50 7-28-98

000002600750--0

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Clement, G. Edward
Potter, Clement and Lowry
308 East Fifth Avenue
Mount Dora, FL 32757

Name

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

G. Edward Potter

REGISTERED AGENT MUST SIGN

Date July 27, 1998

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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:

Kamil Gowni

Kamil Gowni

7-27-98

(407) 257-3121

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (1-98)



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 902125 9585A

AUTHORIZATION : *Patricia Pignatelli*

COST LIMIT : 900.00

ORDER DATE : July 23, 1998

ORDER TIME : 11:36 AM

ORDER NO. : 902125-005

CUSTOMER NO: 9585A

CUSTOMER: G. Edward Clement, Esq
Potter Clement And Lowry
308 East Fifth Avenue

Mount Dora, FL 32757

DOMESTIC FILINGS

NAME: BISHOY, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cassandra Bryant
EXAMINER'S INITIALS

DIVISION OF CORPORATION

98 JUL 24 AM 9:57