

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000072491

1. Corporation Name

AARD2FIND ELECTRONICS, INC.

99 APR 22 AM 10:08

STATE
ILLINOIS - FLORIDA

Principal Place of Business

Mailing Address

**5510 River Road, Suite 209
New Port Richey, FL 34652**

SAME

REINSTATEMENT 97-99

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

2. New Principal Office Address, If Applicable

5510 River Road

Suite, Apt. #, etc.
Suite 209

City & State

New Port Richey, FL

Zip
34652

Country

Pasco

3. New Mailing Office Address, If Applicable

5510 River Road

Suite, Apt. #, etc.
Suite 209

City & State

New Port Richey, FL

Zip
34652

Country

Pasco

4. Date Incorporated or Qualified
To Do Business in Florida

08/30/96

5. FEI Number

59-3482332

Applied For
Not Applicable

6

CERTIFICATE OF STATUS DESIRED ☒

**\$8.75 Additional Fee required
for a Certificate of Status**

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	JOHN G. SKELTON	8733 Whispering Oaks Trail	New Port Richey, FL 34654
			*****2862906--5 -05/05/99--01007--016 ****150.00 ****150.00
			*****2862906--5 -05/05/99--01007--016 ****908.75 ****908.75

8. Name and Address of Current Registered Agent

**JOHN G. SKELTON
6322 Rowan Road
New Port Richey, FL 34653**

9. Name and Address of New Registered Agent

Name
JOHN G. SKELTON
Street Address (P.O. Box Number is Not Acceptable)
**5510 River Road,
Suite 209**
City
New Port Richey
State
FL
Zip Code
34652

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

REGISTERED AGENT MUST SIGN

Date **2/2/99**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John G. Skelton

2/2/99
Date

727

817-0820

Daytime Phone #

CRP040 (1-98)