

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 FEB 27 PM 3:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000077740

1. Corporation Name

PREX NORTH AMERICA, INC.

Principal Place of Business

6372 PALMA DEL MAR BLVD.  
BLDG. H. UNIT #106  
ST. PETERSBURG FL 33715

Mailing Address

6372 PALMA DEL MAR BLVD.  
BLDG. H. UNIT #106  
ST. PETERSBURG FL 33715

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

2. New Principal Office Address, If Applicable

4302 Henderson Blvd.

Suite, Apt. #, etc.

Suite 107

City & State

Tampa, Florida

Zip

33629

Country

USA

3. New Mailing Office Address, If Applicable

4302 Henderson Blvd.

Suite, Apt. #, etc.

Suite 107

City & State

Tampa, FL

Zip

33629

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

09/11/1996

5. FEI Number

59-3434024

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	TASSINI, GUIDO	6372 PALMA DEL MAR BLVD., BLDG.	ST. PETERSBURG FL 33715
D	TASSINI, LILIAM	6372 PALMA DEL MAR BLVD., BLDG.	ST. PETERSBURG FL 33715
V	Richard B. Kelly	3809 Corona St.	Tampa, FL 33629

400002445314--0  
-03/03/98--01047--010  
\*\*\*\*900.00 \*\*\*\*900.00

8. Name and Address of Current Registered Agent

CLARK, BLAIR W  
300-31ST STREET NORTH  
SUITE 101  
ST. PETERSBURG FL 33713

9. Name and Address of New Registered Agent

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

*Richard B. Kelly*

REGISTERED AGENT MUST SIGN

Date 12-1-97

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:

Richard B. Kelly

*Richard B. Kelly*

11/24/97

813-258-0308

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR25040 (8/97)