

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 97-98
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 JAN 22 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000091440

1. Corporation Name

NET CONCEPTS, INC.

Principal Place of Business

1312 THOMASVILLE CIRCLE
LAKELAND FL 33811

Mailing Address

1312 THOMASVILLE CIRCLE
LAKELAND FL 33811



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

2. New Principal Office Address, If Applicable

~~4798 S. Florida Ave, suite 335~~
4798 S. Florida Ave, suite 335

City & State
Lakeland, Florida

Zip Country
33803 US

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
4798 S. Florida Ave, suite 335

City & State
Lakeland, Florida

Zip Country
33803 US

4. Date Incorporated or Qualified
To Do Business in Florida

11/06/1996

5. FEI Number

59-3409056

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 |
|---------------|---|--|---|
| B | BELFATTO, MYKL | 1312 THOMASVILLE CIRCLE 535 Stockton Str, suite 82 | LAKELAND FL 33811 San Francisco, CA 94108 |
| B V | JOVANOVIC, BORKO | 1312 THOMASVILLE CIRCLE 3520 Cleveland Hts Blvd, Apt # 215 | LAKELAND FL 33811 Lakeland, FL 33803 |
| | | | 700002415217--0 -01/28/98--01105--010 ***900.00 ***900.00 |
| | | | REINSTATEMENT 97-98 |
| | | | G. Alan Jan 22, 1998 |

8. Name and Address of Current Registered Agent

BELFATTO, MYKL
1312 THOMASVILLE CIRCLE
LAKELAND FL 33811

9. Name and Address of New Registered Agent

Name
JOVANOVIC, BORKO
Street Address (P.O. Box Number is Not Acceptable)
3520 Cleveland Hts Blvd
Suite, Apt. #, Etc.
Apt # 215
City
Lakeland

State Zip Code
FL 33803

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 Borko Jovanovic
REGISTERED AGENT MUST SIGN

Date Jan 20, 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: Borko Jovanovic Borko Jovanovic
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan 20, 1998 (941) 619-7153

Date Daytime Phone #

CR2E040 (9/97)