

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000164488

1. Corporation Name

Audio Engineering, Inc.

2. Principal Office Address

430 Beverly Parkway

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Pensacola, FL 32505

Zip 32505 **Country** USA

4. Date Incorporated or Qualified 12/26/96
To Do Business in Florida

5. FEI Number
59-3421164

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ YES

7. Name and Address of Current Registered Agent

Name

Daniel R. Lozier

Street Address (P.O. Box Number is Not Acceptable)

125 W. Romana Street

Suite, Apt. #, Etc.

Suite 224

City

Pensacola

State
FL

Zip Code
32501

REINSTATEMENT 97-001 TS

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

**Signature of
Registered Agent**

Daniel R. Lozier
REGISTERED AGENT MUST SIGN

Date 1/11/00

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Robert A. St. Pierre	3101 Marcus Point Blvd.	Pensacola, FL 32505
Vice- President	Danny W. Hilburn	2600 W. Michigan Ave.	Pensacola, FL 32526
Secretary/ Treasurer	Lisa St. Pierre	3101 Marcus Point Blvd.	Pensacola, FL 32505

10. 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:

Danny H. Hilburn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-19-00

Daytime Phone #

(850) 432-4467