

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

bfr

APPLICATION
REINSTATEMENT



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

APPROVED
AND
FILED

98 NOV 19 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000003746**

1. Corporation Name

MEDICO ENGINEERING CORP.

Principal Place of Business

Mailing Address

5331 CAPE LEYLE DRIVE
SARASOTA FL 34242

5331 CAPE LEYLE DRIVE
SARASOTA FL 34242

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/14/1997

5. FEI Number

65-0720087

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
PD	MEDICO, JOHN J JR,P.E.	5331 CAPE LEYLE DRIVE	SARASOTA FL 34242
STD	MEDICO, CHRISTINE M	5331 CAPE LEYLE DRIVE	SARASOTA FL 34242

200002700822--4
-12/02/98--01093--001
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

John J. Medico, Jr.

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

5331 Cape Leyle Drive

Suite, Apt. #, Etc.

City

Sarasota

State

FL

Zip Code

34242

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

John J. Medico, Jr.
REGISTERED AGENT MUST SIGN

Date **11-17-98**

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:

John J. Medico, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nov. 17, 1998

Date

941-349-6240

Daytime Phone #

CR20040 (9/98)

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MEDICO ENGINEERING CORP.
Professional Engineers
Licensed State of Florida

5331 Cape Leyte Drive
Siesta Key, Sarasota, FL 34242

Telephone: (941) 349-6240
Fax : (941) 349-5116

November 17, 1998

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attention: Reinstatement Section

Subject: Application for Reinstatement

Dear Sirs:

We have never received the first notice Corporate Report.

Per instructions from Mr. Tyrone of your office, I am enclosing the following for a one (1) time only waiver:

- a - Check for \$150.00 for reinstatement of Medico Engineering Corp.
- b - Application for reinstatement including:
 - 1 - FEI number
 - 2 - Name & address of new Registered Agent
 - 3 - Signature of new Registered Agent
 - 4 - Signature of President & Director.

Thank you for your consideration of this matter.

Sincerely,



John J. Medico, Jr., P.E. President
Medico Engineering Corp.