

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

99 OCT 19 AM 8:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000019597

1. Corporation Name

EASTCON, INC.

Principal Place of Business

731 OLD COMPASS RD.
LONGBOAT KEY FL 34228

Mailing Address

731 OLD COMPASS RD.
LONGBOAT KEY FL 34228

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

2. New Principal Office Address, If Applicable

687 PENFIELD ST

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

687 PENFIELD ST

Suite, Apt. #, etc.

City & State

LONGBOAT KEY FL

City & State

LONGBOAT KEY FL

Zip

FL 34228

Country

US

Zip

34228

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

02/25/1997

5. FEI Number

59-3429254

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)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director	4. City / State / Zip
D	EAST, JARED G	731 OLD COMPASS RD.	LONGBOAT KEY FL 34228
D	EAST, MARCIA J	731 OLD COMPASS RD.	LONGBOAT KEY FL 34228
P	EAST, JARED G	687 PENFIELD ST	LONGBOAT KEY FL 34228
SVP	EAST, MARCIA J	687 PENFIELD ST	LONGBOAT KEY FL 34228
			700003029237--2 -10/29/99--01057--015 ****758.75 ****758.75

8. Name and Address of Current Registered Agent

EAST, JARED G
731 OLD COMPASS RD.
LONGBOAT KEY FL 34228

9. Name and Address of New Registered Agent

Name EAST, JARED G
Street Address (P.O. Box Number is Not Acceptable)
687 PENFIELD ST
Suite, Apt. #, Etc.

City LONGBOAT KEY State FL Zip Code 34228

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

Jared G East

REGISTERED AGENT MUST SIGN

Date 10/13/99

11. 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

JARED G. EAST

Date

10/13/99

Daytime Phone #

387-8224