

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE
		Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED
99 DEC 30 AM 11:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000028798

1. Corporation Name

TK Industries, Inc.

Principal Place of Business

Mailing Address

70 N. Tropical Way
Merritt Island, FL

32952

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

2. New Principal Office Address, If Applicable

70 N. Tropical Way

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. Box 540989

Suite, Apt. #, etc.

City & State

Merritt Island, FL

City & State

Merritt Island FL

Zip
32952

Country

USA

Zip
32953

Country

USA

REINSTATEMENT

98-99

4. Date Incorporated or Qualified
To Do Business in Florida

3-31-97

5. FEI Number

65-0744688

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	Kimberly D. Neill	70 N. Tropical Way Merritt Island	Merritt Island, FL 32952
VP	Kimberly D. Neill	70 N. Tropical Way	Merritt Island, FL 32952
S	Kimberly D. Neill	70 N. Tropical Way	Merritt Island, FL 32952
T	Kimberly D. Neill	70 N. Tropical Way	Merritt Island, FL 32952
900003087879-8 -01/04/00-01081-003 ****900.00 ****900.00			

8. Name and Address of Current Registered Agent

Kimberly D. Neill
70 N. Tropical Way
Merritt Island, FL
32952

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

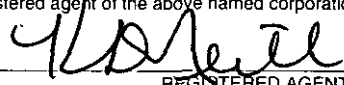
State

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



REGISTERED AGENT MUST SIGN

Date

12/27/99

11. This corporation owes 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.

KE

SIGNATURE:

 Kimberly D. Neill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/27/99

Date

321-459-11

Daytime Phone #