

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000044265

1. Corporation Name

LOWE'S AIRCRAFT INC

900009370879
12/19/02--01031--001 **150.00

2. Principal Office Address

225 E. COWBOY WAY

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

LABELLE FL

City & State

Zip

33935

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

MAY 1997

5. FEI Number

59-345-2722

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RICHARD D. SPARKMAN

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

307 AIRPORT-PULLING Rd. N.

Suite, Apt. #, Etc.

City

NAPLES

State

FL

Zip Code

34104

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

Richard D. Sparkman

Date 12-4-02

REGISTERED AGENT MUST SIGN

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
OWNER	JON M. LOWE	225 E. COWBOY WAY	LABELLE FL. 33935

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:

Jon Lowe Jon Lowe

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-4-02 863
Date Daytime Phone #

CR2E081 (9/01)

272

January,3,2003,

Florida Dept. of State

Subject: Lowe's Aircraft Inc.
Ref. Number P977000044265

The last uniform business report we received on this corporation was filed and mailed Jan. 26,1999. Check #1636. \$150.00.

We did not receive any more UBR after that. The address on the last document was a former address in Naples Fl. The business address and mailing address is ;225 E. Cowboy Way Labelle Fl. 33935. More than likely the UBR was mailed to the old address and was never forwarded.

Please advise as to how to proceed.

Sincerely,
Jon Lowe
Lowe's Aircraft Inc.
225 e. Cowboy Way
Labelle, Fl. 33935