

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FLORIDA DEPARTMENT OF STATE

REINSTATEMENT



Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -7 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000008866300
11/07/02--01049--006 *\$150.00

DOCUMENT # P97000045459

1. Corporation Name

DAVIS INTERNATIONAL, INC.

Principal Place of Business

2396 ORANGE POINTE
PALM HARBOR FL 34683

Mailing Address

2396 ORANGE POINTE
PALM HARBOR FL 34683

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/14/1997

5. FEI Number

59-3450762

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	DAVIS, LUKE E	2396 ORANGE POINTE AVE	PALM HARBOR FL 34683

8. Name and Address of Current Registered Agent

DAVIS, LUKE

2396 ORANGE POINTE AVE

PALM HARBOR FL 34683

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

PALM HARBOR

FL

34683

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. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11/4/02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/4/02

CR2E040 (9/02)

November 5, 2002

Davis International, Inc.
102 S. Canal Dr.
Palm Harbor, FL 34684

-- To Whom It May Concern, --

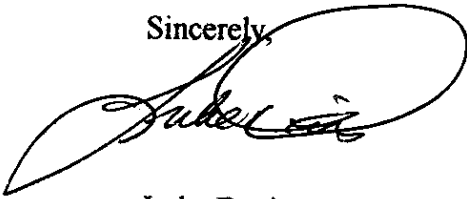
In June 2000, Davis International moved to the above address. Last year when the corporation fees were sent in, I informed the Department of State of the change in address. However, you still have the address as 2396 Orangepoint Avenue, Palm Harbor, FL.

As a result, I did not receive then two prior UBR notices. The notice of administration dissolution is the only notice received.

Please change the address on record, and accept the Annual Corporation fee or \$150.00.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read "Luke Davis", with a large, stylized loop at the end.

----- Luke Davis -----