

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P97000063913

1. Corporation Name

MASTER TECH AUTOMOTIVE, INC.

99 APR - 6 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

1200 E. HIGHWAY 430
ALTAMONTE SPRINGS FL 32701

Mailing Address

1200 E. HIGHWAY 430
ALTAMONTE SPRINGS FL 32701

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

2. New Principal Office Address, If Applicable

754 C.R. 15
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. Box 471326
Suite, Apt. #, etc.

City & State

LAKE MONROE, FL

Zip
32747

Country

SEMINOLE

City & State

LAKE MONROE, FL

Zip
32747-1326

Country

SEMINOLE

REINSTATEMENT

18-99

4. Date Incorporated or Qualified
To Do Business in Florida

07/22/1997

5. FEI Number

59-3457713

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
DP	MILLER, JOHN	1200 E. HIGHWAY 430 754 CR 15	ALTAMONTE SPRINGS FL 32701 LAKE MONROE, FL 32747
DV	MILLER, MARTHA	1200 E. HIGHWAY 430 754 CR 15	ALTAMONTE SPRINGS FL 32701 LAKE MONROE, FL 32747

3000002836833--8
-01/12/99--01132--009
****300.00 ****300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MILLER, JOHN P
1200 E. HIGHWAY 430
ALTAMONTE SPRINGS FL 32701

Name
MILLER, JOHN P
Street Address (P.O. Box Number is Not Acceptable)

754 CR 15
Suite, Apt. #, Etc.
Box 471326

City
LAKE MONROE

State Zip Code
FL 32747

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: 3/31/99

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN P. K. MILLER JR.

3/31/99 407-324-0600

CR2E040 (9/98)