

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUN 25 AM 11:40

DOCUMENT # *P97000067209*

1. Corporation Name

DYNAMIC LIGHTING PRODUCTS, INC.

2. Principal Office Address

32 SANDPIPER RD

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33609

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

SAME

Zip

33609

Country

USA

500021130875
06/25/03--01024--004 **900.00

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

59-346-3359

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

RAYMOND A. CLARK

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

32 SANDPIPER RD.

Suite, Apt. #, Etc.

N/A

City

TAMPA

State

FL

Zip Code

33609

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

Raymond A. Clark, Pres
REGISTERED AGENT MUST SIGN

Date

6/20/03

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
<i>Pres</i>	<i>RAYMOND A. CLARK</i>	<i>32 SANDPIPER RD</i>	<i>TAMPA, FL 33609</i>
<i>Sec</i>	<i>SHEILA M. CLARK</i>	<i>" "</i>	<i>" " "</i>
<i>Treas</i>	<i>RAYMOND A. CLARK</i>	<i>" "</i>	<i>" " "</i>

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:

Raymond A. Clark, Pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/20/03 8132871986

Daytime Phone #

CR2E081 (10/02)

Date/Time June 20, 2003

pgs. 3 including this one.

To: Div. of Corp.

Vc #: 850 245 6059

To: Justin M. Shivers

From: Dynamic Lighting Products, Inc.
RAY CLARK, PRES.

Fx #: 813 289 5451

Vc #: 813 287 1986

Subject: Reinstatement (Corp.)

REF. # P97000067209

Attached please find Corp. Reinstatement form completed along with a check for \$900.00. as per attached letter of May 29, 2003. \$150. X 6 years.

Your Document Specialist related by phone that since the notices had been going to the wrong address, there would be no penalty payment required.

Thank you for your cooperation and understanding.

Raymond A. Clark, Pres.

