

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

99 JUL 23 PM 12:45

DOCUMENT # **997000071963**

1. Corporation Name
The Firelakra Candle Company

Principal Place of Business Mailing Address
8018 SR 54 N P.O. Box 24102
New Port Richey, FL 34653 Tampa, FL 33623

REINSTATEMENT 98-99

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number	
City & State		City & State		Applied For	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres. CEO	Craig M. Tingley	930 Halstead Drive	Marietta, GA 30064
V. Pres.	Anthony V. Nostro	16216 Rambling Vine	Tampa, FL 33624

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Handwritten initials

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Craig M. Tingley 10414 St. Tropez Place Tampa, FL 33615		Name Anthony V. Nostro Street Address (P.O. Box Number is Not Acceptable) 16216 Rambling Vine Suite, Apt. #, Etc. City Tampa State FL Zip Code 33624	

10. I, being appointed the registered agent for the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.
 Signature of Registered Agent: *[Signature]* **Anthony V. Nostro** Date: **July 20, 1999**
 REGISTERED AGENT MUST SIGN: **ANTHONY V. NOSTRO**

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.

SIGNATURE: *[Signature]* **CRAIG M. TINGLEY** 6-19-1999 770-989-2805
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (12/98)