

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN 15 AM 9:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000017792

1. Corporation Name

Michael's Diesel Service Inc.

2. Principal Office Address

5079 W. Beaver st.

Suite, Apt. #, etc.

3. Mailing Office Address

5079 W. Beaver st.

Suite, Apt. #, etc.

City & State

Jacksonville, Florida

City & State

Jacksonville, Florida

Zip

32254

Country

Duval

Zip

32254

Country

Duval

4. Date Incorporated or Qualified
To Do Business in Florida

2-23-1998

5. FEI Number

59-3496962

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

Michael E. Webber / Michael's Diesel Service Inc.

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

5079 W. Beaver st.

Suite, Apt. #, Etc.

400038037454

06/17/04--01014--006 **90.00

City

Jacksonville

State

FL

Zip Code

32254

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

Michael E. Webber
REGISTERED AGENT MUST SIGN

Date

6-14-04

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
P	Michael E. Webber	5079 W. Beaver st.	Jacksonville, FL 32254
VP	Tabitha J. Welsch	5079 W. Beaver st.	Jacksonville, FL 32254
T	Michael E. Webber	5079 W. Beaver st.	Jacksonville, FL 32254
S	Tabitha J. Welsch	5079 W. Beaver st.	Jacksonville, FL 32254

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:

Michael E. Webber
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6-14-04

Daytime Phone #

(904)378-0444

CR2E081 (01/04)