

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000017945**

1. Corporation Name

TECO INTERNATIONAL, INC.

Principal Place of Business

1856 MONTE CARLO WAY
CORAL SPRINGS FL 33071

Mailing Address

1856 MONTE CARLO WAY
CORAL SPRINGS FL 33071

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

REINSTATEMENT

03-04

4. Date Incorporated or Qualified
To Do Business in Florida

02/24/1998

5. FEI Number

65-0582748

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

City / State / Zip

D

FIOCCHI, ELENA

1856 MONTE CARLO WAY

CORAL SPRINGS FL 33071

300032466643
04/12/04--01058--001--**150.00

300032466643
06/04/04--01047--002--**150.00

8. Name and Address of Current Registered Agent

FILINGS, INC.
3732 N.W. 16TH STREET
FT. LAUDERDALE FL 33311-4132

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

FL

33071

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

[Signature]
REGISTERED AGENT MUST SIGN

Date

April 4, 2004

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

April 4, 2004

Daytime Phone

954-341-4857
954-298-4857

Divisions of Corporations
Uniform Business Report Filings
P.O. Box 1500

Doc# 7980.00017945-

Tallahassee FL, 32302-1500

April 6, 2004

Dear Sirs,

Please be advised that I never received the Uniform Business Report for the year 2003. Since 1997 I have filed every year without fail. It could be due to the fact that I changed accountants.

I respectfully submit my check for the fee of \$150.00 with the above claim.

Thanking you in advance
Eleana M. Froett;

President

Teco International Inc.

 If any questions please call me at: 954-

298-4857