

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 APR -1 AM 8:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P98000023298

**1. Corporation Name**

KRYSTAL CARS INC.  
13584 49<sup>th</sup> ST. NORTH #5  
CLEARWATER, FL 33762

**2. Principal Office Address**

13584 49<sup>th</sup> ST. N. #5

Suite, Apt. #, etc.

#5

City & State

CLEARWATER, FL

Zip

33762

Country

USA

**3. Mailing Office Address**

13584 49<sup>th</sup> ST. N.

Suite, Apt. #, etc.

STE #5

City & State

CLEARWATER, FL

Zip

33762

Country

USA

200015743732

04/11/03--01013--010 \*\*300.00

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

**5. FEI Number**

59-3497740

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

GENE CUNNINGHAM

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

311 ORANGE ST.

Suite, Apt. #, Etc.

City

PALM HARBOR

State

FL

Zip Code

34683

**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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date 3/22/03

**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
PRES	ROBERT TULLY	13584 49 <sup>th</sup> ST. N STE #5 -	CLEARWATER, FL 33762
V. Pres	KRISTIN TULLY CUNNINGHAM	6142 HAMPTON DR	SEAFORD, FL 33710
Secy	RHONDA TULLY	13584 49 <sup>th</sup> ST. N. STE #5	CLEARWATER, FL 33762

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2031 (10/02)

21412

Attachment

P98000023298

**CUNNINGHAM & ASSOCIATES**

311 Orange Street  
Palm Harbor, Florida 34683

727-784-2519

March 22, 2003

DIVISION OF CORPORATIONS  
UNIFORM BUSINESS REPORT FILINGS  
PO BOX 1500  
TALLAHASSEE, FL 32302-1500

To Whom It May Concern:

We have not received an annual report for our corporation because the state Had an incorrect address. Per a telephone conversation with the state we were Told to write a letter stating this and pay two years fees. We respectfully request An abatement of all penalties as we never received the proper forms to file. Attached is a copy of an annual report and the fees. If you have any further questions or Concerns please do not hesitate to call us.

Sincerely,

A handwritten signature in black ink, appearing to read 'Gene Cunningham', is written over a horizontal dashed line.

Gene Cunningham