	PLEASE REAL					ING THIS I	FORM.	1	
APPLICATION AND TO			RIDA DEPARTMENT OF STATE Katherine Harris		FILED				
			Secretary of S			9 OCT 27	DM 2: 10		
REIN	ISTATEMENT Y		VISION OF CORPOR	RATIONS				· ·	
DФСИМЕНТ # P98000032349 1. Cyrporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA				
PRÓ-F	LIGHT, INC.								
Principal Place of Business Mailing Address									
6930 VENTURE CIRCLE ORLANDO FL 32807		_	6930 VENTURE CIRCLE						
			ORLANDO FL 32807		L INCOLUNIO TO DELICE MANTE ORBITA ORBITA ROBATA ERANO ERANO TARGO TINHA DILIPAD TOTA TODO.				
	addresses are incorrect in any way, line						-		
2 New Principal Office Address, If Applicable 1571 Eagle Nest Circle		1571 Ea	3. New Mailing Office Address, If A 1571 Eagle Nest Cir		4. Date Incorporated or Qualified To Do Business in Florida 04/06/1998 5. FEI Number Applied F		a l		
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.					Applied For	
City & Sta Winter	nte r Springs, FL	City & State Winter	Springs, FL	1	6.			Not Applicable	
Zip Country Zip			Country 3 USA		CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status				
	s and Street Addresses of Each Officer		orida nonprofit corpora	ations must list at lea		T			
Title(s)	Name of Officers and/or Directors			eet Address of Each ficer and/or Director					
D	CALLEDARE, RICHARD M		0000-1-121-121-121-121-121-121-121-121-1						
			1571 Eagle		le	Winter Springs, FL 32708			
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					-11/04/9901033005 ****150.00 ****150.00				
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				<u> </u>					
8. Name and Address of Current Registered Agent Name					9. Name and /	9. Name and Address of New Registered Agent			
					Richard M. P.O. Box Number is Not Acceptable)				
200 N. THORNTON AVE.					1571 Eagle Nest Circle				
ORLANDO FL 32801				Suite, Apr. #, Etc.					
	_			City Winter Sp	rings		FL 3270		
10. I, beir	ng appointed the register of agent of the	above named cor	poration, am familiar w	vith and accept the c	obligations of Sect	ion 607.0505, F.S.	10/-1		
Signature Registeres		REGISTERED A	GENT MUST SIGN			Date	125/9	9	
this re owed	ify that I am an officer or director or the r instatement application, the reason for by the corporation have been paid and s application is true and accurate, and n	dissolution has bee the names of indiv	n eliminated, the corp iduals listed on this fo	orate name satisfies rm do not qualify for	s the requirements r an exemption un	s of section 607.04	01 or 617.0401, F.S.,	that all ages	
		_				16/	<i>U</i> a	graphic specialists	
SIGNA	ATURE:	16	Uleslan			10/23/99		14766	
	SIGNATURE AND TYPED OF		SIGNING OFFICER OR			Date	Daytime Phor	∌e#	
	Xicha	RO (A	LLEDARI	E					

CHASTANG, FERRELL, SIMS & EISERMAN, L.L.C.

Certified Public Accountants & Consultants

A member of



1400 W. Fairbanks Ave. Suite 102 Winter Park, Florida 32789 Tel.: (407) 629-1944 Fax: (407) 740-0671

SunTrust Bank Center - Building 1 Suite 309 - 3379 West Vine Street Kissimmee, Florida 34741 Tel.: (407) 935-0101 Fax: (407) 935-0103

Please reply to:

Winter Park

Northern Trust Building Suite 285 - 4001 Tamiami Trail North Naples, Florida 34103 Tel.: (941) 643-1901

Fax: (941) 643-9808

October 22, 1999

Department of State **Division of Corporations** P.O.Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Please find enclosed the Application for Reinstatement for Pro-Flight, Inc. Due to problems with our client's prior accountant, the Corporate Annual Report for 1999 for Pro-Flight, Inc. was not filed. It is for this reason we respectfully request that your office grant a one-time waiver of the reinstatement fee of \$600.00. Please note that the client will take the necessary steps to ensure the Corporate Annual Report is filed by May 1st in future years.

Thank you and if you have any questions please do not hesitate to contact our office.

Yours very truly,

Maria A. Thomas

MAT:jtc

Enclosures as stated

Mid & Thomas

cc: Pro-Flight, Inc.

Email: cfse@cfsecpa.com NEXIA International is a worldwide association of independent accounting firms