PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

0209

FILED
03 MAY -1 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000042205

**1.** Corporation Name

CLEAR'S SILAT, INC

300015664853
04/11/03--01004--024 **450.00

| **2.** Principal Office Address | **3.** Mailing Office Address |
|---|---|
| 611 WEST AZEELE STREET | 3932 MORGANTON ROAD |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State: TAMPA, FLORIDA | City & State: MARYVILLE, TN |
| Zip: 33606 / Country: USA | Zip: 37801 / Country: USA |

**4.** Date Incorporated or Qualified To Do Business in Florida: 05/11/1998

**5.** FEI Number: 59-3517871 ☐ 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: STRATTON H. SMITH

Street Address (P.O. Box Number is Not Acceptable): 611 WEST AZEELE STREET

Suite, Apt. #, Etc.:

City: TAMPA | State: FL | Zip Code: 33606

**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 _____ Date _____

REGISTERED AGENT MUST SIGN

**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 | RICHARD E. CLEAR, JR. | 3932 MORGANTON ROAD | MARYVILLE, TN 37801 |
| | | | |
| | | 300015664853 05/01/03--01058--002 **150.00 | |
| | | | |
| | | | |
| | | | |

**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:** Richard E. Clear Jr. Richard E. Clear Jr. 04/02/03 (865) 379-9997

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

*Carregal Accounting Service*

10809 N. 56th Street, Temple Terrace, Florida 33617
(813)877-6371 FAX(813)868-0774

State of Florida
Division of Corporations
PO BOX 6327
Tallahassee, Florida 32314

11 March 2003

RE: CLEAR'S SILAT, INC. DOC# P98000042205

To Whom It Concern:

This letter is to inform you that my client, Mr. Richard Clear never received his UBR forms for the past 3 years. The principle mailing address for the corporation is 3932 Morganton Road, Maryville TN 37801

We are requesting that any filing fees be waived and per my conversation with a state agent enclosed please find a check for $450.00 and a reinstatement application.

Sincerely,

Alan Carregal