

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 OCT 19 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000045342

1. Corporation Name

HIGH AIR CHARTERS, INC.

Principal Place of Business

Mailing Address

5195 FAY BLVD.
COCOA FL 32927

5195 FAY BLVD.
COCOA FL 32927

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/18/1998

5. FEI Number

59-3515790

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
President	James Ivey High	5195 Fay Blvd.	Cocoa, FL 32927

900003026989--9
-10/27/99--01096--004
****158.75 ****158.75

11LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HIGH, JAMES I
5195 FAY BLVD.
COCOA FL 32927

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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.

Signature of
Registered Agent

James Ivey High
REQUIRED
REGISTERED AGENT MUST SIGN

Date 10-13-99

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

James Ivey High
REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-13-99
Date

407-639-8599
Daytime Phone #

(2)

JAMES I. HIGH
5195 Fay Boulevard
Cocoa, Florida 32927

October 14, 1999

Division of Corporations
Annual Report/Reinstatement Section
P. O. Box 6327
Tallahassee, FL 32314-6327

Gentlemen:

I am returning the application for reinstatement for the following corporations:

High Air Charters, Inc.	P98000045342
High Sea Charters, Inc.	P98000054901

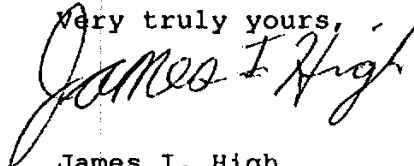
I did not receive the annual report or the second notice for either of these corporations, despite the fact that the addresses on these reinstatement applications are correct.

I called the Department of State today and was advised that I should send this letter, the applications for reinstatement and checks for \$150.00 for each corporation, and they would be reinstated.

The checks for the two corporations are for \$158.75 each, and I request that you provide me with a Certificate of Status, indicating both Corporations are active.

Thank you for your assistance.

Very truly yours,



James I. High

JIH:mlt
Enclosures: as stated