

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED


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02 JAN -8 PM 4:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****308.75 ****308.75

01-02

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000046419			
1. Corporation Name Kovacs Geza, Inc.			
2. Principal Office Address 1901 Industrial Park Dr. Suite, Apt. #, etc.		3. Mailing Office Address P.O. Box 1837 Suite, Apt. #, etc.	
City & State Plant City, FL		City & State Plant City, FL	
Zip 33567	Country USA	Zip 33564	Country USA

4. Date Incorporated or Qualified To Do Business in Florida 5/21/98	
5. FEI Number 59-3521375	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name Kovacs, Geza		
Street Address (P.O. Box Number is Not Acceptable) 1901 Industrial Park Dr.		
Suite, Apt. #, Etc.		
City Plant City	State FL	Zip Code 33567

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 Geza Kovacs **REGISTERED AGENT MUST SIGN** **Date** 1/7/2002

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	Geza Kovacs	1102 Sugar-tree Dr. S	Lake land, FL, 33813
SEC	Geza Kovacs	1901 Industrial Park Dr	Plant City, FL, 33567
VP	Georgie Kovacs	1102 Sugar-tree Dr. S.	Lake land, FL 33813

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: Geza Kovacs **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **Date** 1/7/2002 **Daytime Phone #**

CR2E081 (9/01)

Kovacs Geza, Inc.

2012

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

Dear Department:

The Company did not receive notice for any filings for Kovacs Geza, Inc. until 12/28/2001. We filed for our fictitious name "Refuse Express" as we did receive notice for the filing for Refuse Express.

We believe that the reason for not receiving this notice is because the mailing address in the system is incorrect. In addition, many companies try to mail documents to our physical address. The department may have inadvertently done this. As such, a waiver of the penalty fee is warranted.

Sincerely,



Geza Kovacs
President
Kovacs Geza, Inc.

RECEIVED
02 JAN - 8 PM 4:43
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA