

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

99 DEC 22 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

0980000-86034

1. Corporation Name

Spoor Electric, Inc.

Principal Place of Business

165 Cleary Road, Suite B1
West Palm Beach, FL 33413-1645

Mailing Address

515 Post Oak Blvd., Suite 450
Houston, TX 77027

REINSTATEMENT 1999

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

2. New Principal Office Address, If Applicable
not applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Address, If Applicable
not applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10-7-1998

5. FEI Number

74-2899568

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 (Do NOT Use Post Office Box Numbers)	4 City/State/Zip
CEO	Jim Wise	515 Post Oak Blvd., Suite 450	Houston, TX 77027
VP/Asst. Se	John Wombwell	515 Post Oak Blvd., Suite 450	Houston, TX 77027
President	John Kelywegt	165 Cleary Road, Suite B1	West Palm Beach, FL 33413
CAO	Neil DePascal, Jr.	515 Post Oak Blvd., Suite 450	Houston, TX 77027
CFO	Stanley Florance	515 Post Oak Blvd., Suite 450	Houston, TX 77027

8. Name and Address of Current Registered Agent

UCC Filing & Search Services, Inc.
526 East Park Avenue
Tallahassee, FL 32301

9. Name and Address of New Registered Agent

Name
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Rd.

Suite, Apt. #, Etc.

City
Plantation

State
FL

Zip Code
33324

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

Victor Alfano

Date

12-21-99

Victor Alfano, Asst. Secy. REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

John Wombwell

SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR

12-21-1999

Date

(713) 860-1525

Daytime Phone #