

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # P98000086399

1. Corporation Name

SOUTH CENTRAL INVESTMENT CORPORATION

Principal Place of Business

Mailing Address

1013 SW 49TH AVE  
MARGATE FL 33068

1013 SW 49TH AVE  
MARGATE FL 33068

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

10/05/1998

SP

5. FEI Number

65-0866500

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
PD	SMITH, NEWTON	1013 SW 49TH AVE	MARGATE FL 33068
VD	SMITH, MARCIA	1013 SW 49TH AVE	MARGATE FL 33068
			400003514484--5 -12/27/00--01061--021 ****908.75 ****908.75

8. Name and Address of Current Registered Agent

SMITH, NEWTON  
1013 SW 49TH AVE  
MARGATE FL 33068

9. Name and Address of New Registered Agent

Name  
NEWTON O. SMITH  
Street Address (P.O. Box Number is Not Acceptable)  
1013 SW 49 AVENUE  
Suite, Apt. #, Etc.

City  
MARGATE

State

Zip Code

FL 33068

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

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date 10/15/99

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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
NEWTON O. SMITH

Date 10/15/99

(954)  
364-6150  
Daytime Phone #

P98000086399

MINUTES OF THE ANNUAL MEETING

OF

SHAREHOLDERS

OF

SOUTH CENTRAL INVESTMENT CORPORATION

MINUTES of the Annual Meeting of Shareholders, held at  
on the 15th day of SEPT., 1999.  
at 10 o'clock.

The meeting was duly called to order by the President, who  
stated the object of the meeting and requested the election of a Chariman.

On motion duly made and carried, the vote was taken and  
was duly declared  
elected Chairman of the Meeting.

The Secretary then read the Notice of Meeting together with the  
Affidavit of service thereof, which were ordered appended to these  
Minutes.

The Secretary reported that the list in said Affidavit of  
Mailing of Notice of Annual Meeting contained the names of all  
Shareholders of the Corporation, and their post-office addresses, as the  
same appear from the books of the Corporation.

The Chairman then directed the Secretary to call the roll of  
Shareholders from the Sharetransfer book of the Corporation:

The following Shareholders were present in person:

<u>Name of Shareholders</u>	<u>No. of Shares</u>
NEWTON SMITH	50
MARCIA SMITH	50

The following Shareholders were present by proxy:

<u>Name of Shareholders</u>	<u>Proxy</u>	<u>No. of Shares</u>
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