

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAY 13 PM 2:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P980000101591

1. Corporation Name

RAO AUTOMOTIVE, INC.

2. Principal Office Address

8811 NW 8 ST

Suite, Apt. #, etc.

3. Mailing Office Address

8811 NW 8 ST

Suite, Apt. #, etc.

City & State

PENSACOLA PINES FL

Zip

33024

Country

City & State

PENSACOLA PINES FL

Zip

33024

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

12/01/98

5. FEI Number

65-0889018

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

JOHN RAO

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

8811 NW 8 ST

Suite, Apt. #, Etc.

City

PENSACOLA PINES

State

FL

Zip Code

33024

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

John Rao

REGISTERED AGENT MUST SIGN

Date 5/8/03

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 DIR	JOHN RAO	8811 NW 8 ST	PENSACOLA PINES FL 33024
VP SEC	MELINDA RAO	8811 NW 8 ST	PENSACOLA PINES FL 33024

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:

John Rao

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN RAO PRES

5/8/03

Date

954-432-0994

Daytime Phone #

CR2E061 (10/02)

5/12/03

5/8/03

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN

I DID NOT RECEIVE THE RENEWAL FOR THE YEAR  
2002 FOR RAO AUTOMOTIVE, INC.

DOCUMENT # P98000101591

THANK YOU

John Leo

President RAO AUTOMOTIVE, INC