

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 OCT 20 PM 4:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000107093

1. Corporation Name

ROAD TIRE SERVICE, INC.

Principal Place of Business

1597 63RD ST. NORTH
CLEARWATER FL 33760

Mailing Address

1597 63RD ST. NORTH
CLEARWATER FL 33760

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.

PO Box 2362
City & State
Pinellas Park Florida
Zip
33780 Country
Pinellas

Suite, Apt. #, etc.

PO Box 2362
City & State
Pinellas Park Florida
Zip
33780 Country
Pinellas

4. Date Incorporated or Qualified
To Do Business in Florida

12/28/1998

5. FEI Number

59-3549179

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	KROVICH, LINNY	P.O. BOX 2362 N/A	PINELLAS PARK FL 33780
VD	SIMONS, DANIEL ERIK	6803 CLINTON WAY	WESLEY CHAPEL FL 33544
SD	, BEVERLY LYNN Simons	6803 CLINTON WAY	WESLEY CHAPEL FL 33544
			500003032125--6 -11/02/99--01044--009 ****150.00 ****150.00 LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KROVICH, LINNY
15097 63RD ST. NORTH
CLEARWATER FL 33760

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

Linny Krovich

REGISTERED AGENT MUST SIGN

Date

10-14-99

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.

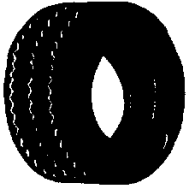
SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-14-99 (727) 524-9564

Date

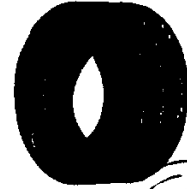
Daytime Phone #



Road Tire Service

PO Box 2382 Pinellas Park, FL 33780

Phone: (727) 524-9564 Fax: (727) 524-9735



**Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399**

To whom It may Concern:

I recently received a letter stating that my Corporation has been revoked or dissolved due to not filing my 1999 annual report. I did not receive any notices prior to the final one. I had my account incorporate my business but they failed to put in the paperwork that my business did not open for business until March of 1999. I contacted your office via telephone and the associate stated I could send in \$150.00 to bring my corporation back into good standing. If there is any problems please call me at (727) 524-9564.

Thank you

Daniel Simons (VP)