

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 SEP 30 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000001338

1. Corporation Name

Tim International, Inc.

2. Principal Office Address

12830 Yacht Club Circle

Suite, Apt. #, etc.

City & State

Ft. Myers, Fl.

Zip

33919

Country

U.S.

3. Mailing Office Address

12830 Yacht Club Circle

Suite, Apt. #, etc.

City & State

Ft. Myers, Fl.

Zip

33919

Country

U.S.

**4. Date Incorporated or Qualified
To Do Business in Florida**

09/28/1998

5. FEI Number

65-0906968

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

Tadeusz R. Kalinowski

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

12830 Yacht Club Circle

Suite, Apt. #, Etc.

City

Ft. Myers

State
FL

Zip Code
33919

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

REGISTERED AGENT MUST SIGN

Date

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.	Tadeusz Kalinowski	12830 Yacht Club Circle	Ft. Myers, Fl. 33919

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

09-23-03

CR2E081 (10/02)

**Tim International, Inc.
12830 Yacht Club Circle
Ft. Myers, Fl. 33919**

September 4, 2003

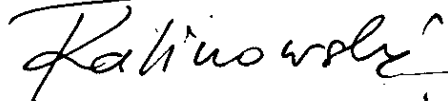
**Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314**

Dear Sir or Madame:

I am sending you the current mailing address to receive future annual filing reports from the Florida Division of Corporations. I am requesting a waiver of any penalties for non filing of prior year annual reports because of not receiving those reports in the mail. Enclosed you will find a completed corporation reinstatement form to reinstate Tim International, Inc. In addition you will find a check covering annual report filing fees for years 2000, 2001, 2002, and 2003 .

Year	Filing Fees
2000	\$150.00
2001	150.00
2002	150.00
2003	150.00
Total	\$600.00

Sincerely yours,



**Thadeusz Kalinowski
President of Tim International, Inc.**