

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 FEB 13 AM 8:06

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P99000014093

1. Corporation Name

PACK-TECH INDUSTRIES, INC.

2. Principal Office Address

4302 EAST 10TH AVE

Suite, Apt. #, etc.

301

City & State

TAMPA, FL

Zip

33605

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business In Florida

2/12/1999

5. FEI Number

65-0894580

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

MICHAEL B. BLAIE

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

4302 EAST 10TH AVE #301

Suite, Apt. #, Etc.

301

City

TAMPA

State

FL

Zip Code

33605

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

Michael B. Blaikie
REGISTERED AGENT MUST SIGN

Date 01/22/02

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 DIRECTOR	MICHAEL B. BLAIE	4302 EAST 10TH AVE # 301	TAMPA FL 33605
VP DIRECTOR	ROBIN M. BLAIE	4302 EAST 10TH AVE # 301	TAMPA FL 33605

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:

Michael B. Blaikie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

01/22/02

Daytime Phone #

813 241 1404

10f2

01.02

CR2E061 (9/01)

PB

PACK-TECH INDUSTRIES, INC

2012

January 28, 2002

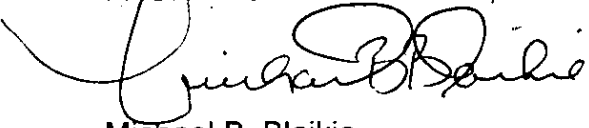
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Corporate Reinstatement
FEI# 65-0894580

To whom it may concern,

Our inactive corporate status was brought to my attention our banker. We did not receive a Uniform Business Report to file. I am requesting a waiver for non-receipt. Please find my Corporate Reinstatement Application along with my check for \$150.00. Please call me with any questions.

Sincerely,
PACK-TECH INDUSTRIES, INC.



Michael B. Blaikie
President