

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JAN 22 PM 2:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P99000042410**

1. Corporation Name

**Atomic Industries, Inc.**

**REINSTATEMENT** 03-04

2. Principal Office Address

**5976 20th St.**

Suite, Apt. #, etc.

**STE 214**

City & State

**Vero Beach FLA.**

Zip

**32966**

Country

**USA**

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

**2001**

5. FEI Number

**65-0928890**

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

**SEAN CAMERON**

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

**5976 20th Street**

Suite, Apt. #, Etc.

**STE 214**

City

**Vero Beach**

State  
**FL**

Zip Code

**32966**

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

*[Signature]*

REGISTERED AGENT MUST SIGN

Date **1-14-2004**

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
<b>Pres</b>	<b>SEAN CAMERON</b>	<b>5976 20th St STE 214</b>	<b>Vero Beach FL 32962</b>

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1-14-04 954-592-0008**

Date

Daytime Phone #

CR2081 (10/02)

Atomic Industries, Inc.

1-14-2004

Dear State,

I relocated my business to 5976 20<sup>th</sup> Street, Ste. 214, Vero Beach, Florida 32962 from 10693 Wiles Rd #209. I did not receive any paperwork to fill my UBR. I called into the State on 1-14-2004. I was told to fill out the attached forms and send in a check for \$300. Could you please update my records.

New Address:

5976 20<sup>th</sup> Street Ste 214

Vero Beach, Florida 32962

Old Address:

10693 Wiles Rd Ste 209

Coral Springs, Florida 33076

My direct contact is 954 592 0008

Please Remove

Ralph Curra as VP

Vivek Patel as AS

Thank you,

Sean Cameron

President

Atomic Industries, Inc.