

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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FILED

05 JAN 28 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **533596**

1. Corporation Name

PRO-TECH MOTORS, INC

2. Principal Office Address

55 NEW ATHA RD

Suite, Apt. #, etc.

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

ORANGE, MA

City & State

Zip

01364

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

2/22/91

5. FEI Number

☒ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 92-05

7. Name and Address of Current Registered Agent

Name

RONALD WATTU

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

130 LEISUREVILLE BLVD

Suite, Apt. #, Etc.

City

BOYNTON BEACH

State

FL

Zip Code

33426

200046013502
02/04/05--01013--09 **2708.75

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

Ronald Wattu

Date

1/18/05

REGISTERED AGENT MUST SIGN

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	RONALD WATTU	1740 MASSACHUSETTS AVE	Bordman, MA 01719
V.P.	"	"	"
SECM	"	"	"
TREAS	"	"	"

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:

Ronald Wattu

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/18/05

Daytime Phone #

413 532 4870

CR2001 (01/05)