

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

96 DEC 20 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V22107

1 Corporation Name

Stenwood International, Inc.

Principal Place of Business

Mailing Address

~~2333 Benson St~~
~~Saras. Fl. 34233~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

2364 Browning St.

Suite, Apt. #, etc.

3. New Mailing Address, If Applicable

SAME

Suite, Apt. #, etc.

City & State

Sarasota Fl.

City & State

Zip

34237

Country

USA

Zip

Country

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified
To Do Business in Florida

3-18-92 3-11-92

5. FEI Number

65-0336814

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Vice President	Kevin Wooster	515 Bobby Jones Saras. Fl. 34232	
President	Charles Stenica	2364 Browning St.	Saras. Fl. 34237

000002038340--2
-12/26/96--01026--009
****983.75 ****983.75

JB12-20-96

8. Name and Address of Current Registered Agent

Kevin Wooster
2324 Wells Ave
Saras. Fl. 34232

9. Name and Address of New Registered Agent

Name John L. Moore
Street Address (P.O. Box Number is Not Acceptable)
200 S. Orange Ave
Suite, Apt. #, Etc.
City Sarasota State FL Zip Code 34236

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

John L. Moore
REGISTERED AGENT MUST SIGN

Date 12/17/96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Kevin Wooster
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-17-96

Date

941-377-3814

Daytime Phone #

CR2004 (12/95)