

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 JUL 17 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V49592

1. Corporation Name

T-CAP, INC.

2. Principal Office Address

3852 L.B. McLeod Road

3. Mailing Office Address

5 North Best Point

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando FL

City & State

Inverness FL

Zip

32805

Country

U.S.

Zip

34450

Country

4. Date Incorporated or Qualified
To Do Business in Florida

7-10-1992

5. FEI Number

593136561

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

WALTER D. LUNDELINUS, SR

300007111653--4

-08/14/02--01059--009

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

5 North Best Point

***158.75 ***158.75

Suite, Apt. #, Etc.

City

Inverness

State

FL

Zip Code

34450

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

Walter D. Lundelinus, Sr.

Date

4/30/2002

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
PD	Terry Robinson	1875 N. Leavitt Ave	Orange City FL
TD	Steve Robinson	3050 Grand Ave	Deland, FL

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

4/30/2002

Daytime Phone #

407-423-5796

CR2E031 (9/01)

Florida All Business Services, Inc.

Computer Consulting
Tax & Accounting Service

292

July 15, 2002

To: Florida Department of State
Division of Corporations
Corporate Records
P O Box 6327
Tallahassee, FL 32314

Subject: T-Cap Corp.
Ref: # V49592 - UBR 2001 & 2002

Enclosed please find the 2001 and 2002 UBR Reports plus 2 checks totaling \$308.75 for the above referenced Corporation.

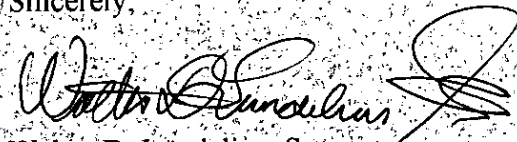
The UBR renewal forms for those two years had never been received due to address changes from 2438 Shoal Creek Ct. Oviedo, FL to P O Box 617126, which was later closed, and the Postal Services failure to forward to the new address of, 3852 L B McCleod Road, Orlando, FL 32805

This year I have been asked to assume the responsibility of Registered Agent for the Corporation. In doing so I discovered that the corporation was administratively dissolved for failure to file its 2001 corporate annual uniform business report

Since the change of address was the reason the report had never been filed, we are asking you to abate the penalties required, and re-instate the Corporation to an active status.

Thank you for giving this request your immediate and positive response.

Sincerely,



Walter D. Lundelius, Sr.
Registered Agent, T-Cap Corp.

