Organization ID # 0737402 State of origin

Filing fee

KY \$115.00

Commonwealth of Kentucky Trey Grayson, Secretary of State 0737402.09

bschell **PRPF** 

Trey Grayson, Secretary of State

Received and Filed: 1/12/2011 1:03 PM Fee Receipt: \$115.00

Trey Grayson Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

## **Reinstatement Application and Reinstatement Annual Report** For the year 2010

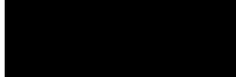
**RST** 

Exact organization name and principal office address

BARGEHEIGHTS, INC. **429 FAIRFIELD DR LEXINGTON KY 40503**  The principal office address and registered agent name/office address cannot be changed on this form. When reinstating, you cannot modify the addresses until the reinstatement is filed. Once the reinstatement is filed, the statement of change can be filed online at app.sos.ky.gov/ftsearch or can be downloaded from our website.

## Registered Agent and Registered Office Address

MATTHEW E. COOPER 429 FAIRFIELD DR LEXINGTON, KY 40503



Principal Officers - L	ist the name, address and title of all current officers. All	organizations must list at least one (1) officer, even in the	case of a sole officer,
President	MATHEN & COOPER	429 FAIRFIELD DR LET	XINUTON ICY 40503
Vice-President	GIFTEN IC. GRIMM		
Secretary	<del> </del>		
Treasurer			
Directors - List the name	and address of all directors (if applicable). No listing of o	irectors is verification that the corporation has dispensed v	vith directors.
	<del></del>		
2010. The undersigned	states that the grounds for dissolution eith	2010 because the entity did not file its annu- ner did not exist or have been eliminated, an	nd the entity's name
satisfies the requirement	nts of KRS 271B.14-210. Enclosed is a ch	eck in the amount of \$115.00, payable to Ke	entucky State Treasurer.
		Kentucky Department of Revenue to release of State, as required for reinstatement purs	
If not an officer of said,	entity/please provide a Declaration of Pow	er of Attorney with the Reinstatement Applie	cation.
x ////		RESIDENT	12/15/2010

Signature of officer of chairman of the board (Required) Title (Required) Date (Required)



THOMAS B. MILLER
Commissioner

## FINANCE AND ADMINISTRATION CABINET DEPARTMENT OF REVENUE OFFICE OF INCOME TAXATION

**ELYSE WEIGEL**Deputy Commissioner

DON RICHARDSON Executive Director

January 12, 2011

BARGEHEIGHTS, INC. 429 FAIRFIELD DR LEXINGTON KY 40503

Re: Request for a Letter of Good Standing

The Department of Revenue records indicate **BARGEHEIGHTS**, **INC.** has filed Kentucky Income Tax Returns through the tax year ended 12/31/2009, and has paid the taxes shown to be due or assessed as of the date of this letter. The Department of Revenue requests the company's charter be reinstated provided all other requirements of the Secretary of State have been met by the corporation. This letter is valid for 30 days from the date of this letter.

Sincerely,

Theresa Collins, Taxpayer Specialist II Division of Corporation Tax 501 High Street, 7th Floor, Sta. 52 Frankfort, KY 40601 502-564-7288 FAX# 502-564-0058

Kentucky Secretary of State organization number 0737402





## EDUCATION and WORKFORCE DEVELOPMENT CABINET OFFICE OF EMPLOYMENT AND TRAINING

**Steven L. Beshear** Governor

Tax Enforcement Branch 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone (502) 564-2272 Fax (502) 564-5442 www.oet.ky.gov Joseph U. Meyer Secretary

William Monterosso
Executive Director

Date: 01/12/2011	
BARGEHEIGHTS, INC.	
Dear Sir/Madam:	

The Division of Unemployment Insurance certifies that, on this date, this applicant for corporate charter reinstatement meets the requirements of KRS 271B.14-220(1)(e).

KRS 271B.14-220(1)(e) CERTIFICATE

Sincerely,

Molly Albrecht Division of Unemployment Insurance 275 East Main Street, 2-EH Frankfort, Kentucky 40621 Phone: (502) 564-2272

Kentucky Secretary of State organization number 0737402

