

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6384

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

CORPORATION REINSTATEMENT
THERAKOS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,350.00

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Corporate Filing Menu

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11 JUN -6 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H33345**

1. Corporation Name
Therakos, Inc.

2. Principal Office Address - No P.O. Box #
One Johnson & Johnson Plaza

3. Mailing Office Address
One Johnson & Johnson Plaza

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
New Brunswick, NJ

City & State
New Brunswick, NJ

Zip
08933

Country
United States

Zip
08933

Country
United States

4. Date Incorporated or Qualified
To Do Business in Florida **12/10/1984**

5. FEI Number
22-2575957

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
CT Corporation System

Direct Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City
Plantation

State Zip Code
FL 33324

07-11

*MSD
6/6*

8. I, being appointed the registered agent of the above named corporation, hereby accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Chris McNear
Assistant Secretary

Date **6/6/2011**

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
D/S	Randall L. Nixon	1001 US RT 202 North	Raritan, NJ 08869
D/P	Michael J. Yang	1001 US Rt. 202 North	Raritan, NJ 08869
VP/T	Steven Barishtaris	1001 US Rt. 202 North	Raritan, NJ 08869
AS	John F. Sharkey	One Johnson & Johnson Plaza	New Brunswick, NJ 08933

10. E-mail Address:

(To be used for future annual report notification)

11. I certify that I am an officer or director of 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. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in 8.17.166, F.S.

SIGNATURE:

John F. Sharkey

6-3-11

732-524-2787

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #