

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P37959

1 Corporation Name

VS Holdings, Inc.

Principal Place of Business

Mailing Address

600 Bypass Drive  
Suite 215  
Clearwater, Florida 34624

Same

W96-22175

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

2. New Principal Office Address, If Applicable

Same

Suite, Apt. #, etc.

3. New Mailing Address, If Applicable

Same

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FILED

96 DEC 16 AM 10:21

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

94-96-00

4. Date Incorporated or Qualified To Do Business in Florida

3-17-92

5. FEI Number

54-1614171

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
Dir.	Victor B. Strauss, Jr.	101 Kirkwood Lane	Camden, South Carolina 29020
Dir.	Gordon Strauss	7440 Demar Road	Cincinnati, Ohio 45243
Dir.	Jeffrey Strauss	1259 Elsinore Avenue	Cincinnati, Ohio 45202
Dir.	Nicholas Lampshire	202 Greene Street	Camden, South Carolina 29020
Pres., V.P., Sec.,	Victor B. Strauss, Jr.	See above	
Treas.			

500002033675--1  
-12/19/96--01031--013  
\*\*\*775.00 \*\*\*775.00

8. Name and Address of Current Registered Agent

W. Thompson Thorne, III  
101 East Kennedy Boulevard  
Suite 2500 2800  
Tampa, Florida 33602

(this is a new address only)

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I am appointing the registered agent of the above named corporation, Jim Lawler with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

*W. Thompson Thorne, III*  
REGISTERED AGENT MUST SIGN

Date

11/18/96

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:

*Victor B. Strauss, Jr.*

Victor B. Strauss, Jr.

9/6/96

803-432-6451

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Date

Daytime Phone #

CR25040 (12/95)