

To: The Florida Dept. of State
Subject: 000466.88030

From: Ashley Smith

Page 1 of 2

2

H08000145089-3

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08 JUN -5 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**2008 FOR PROFIT CORPORATION
REINSTATEMENT**

DOCUMENT # P98000107815			
1. Entity Name STS APPAREL CORPORATION			
Principal Place of Business 325 W 74 PLACE HIALEAH, FL 33014		Mailing Address 325 W 74TH PLACE HIALEAH, FL 33014	
2. Principal Place of Business - No P.O. Box 5944 CORAL RIDGE DRIVE Suite, Apt. #, etc. #254		3. Mailing Address 5944 CORAL RIDGE DRIVE Suite, Apt. #, etc. #254	
City & State Coral Springs, FL		City & State Coral Springs, FL	
Zip 33076	Country USA	Zip 33076	Country USA
4. Name and Address of Current Registered Agent TACHER, MARTIN 325 W. 74 PLACE MIAMI, FL 33014		4. FBI Number 65-0883080	
5. Name and Address of New Registered Agent CorpDirect Agents, Inc. Street Address (P.O. Box Number is Not Acceptable) #15 East Park Avenue Tallahassee, FL 32301		6. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
7. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Ronnie Womack, Asst. Sec.</i>		DATE <i>6/5/08</i>	
FILE NOW!! FEE IS \$300.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO TACHER, MARTIN 325 W 74TH PLACE HIALEAH, FL 33014	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TIAPAGO, MARCO 325 W 74TH PLACE HIALEAH, FL 33014	☒ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP VALANCY, SCOTT 325 W 74TH PLACE HIALEAH, FL 33014	☐ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an affidavit with all other live employees.			
SIGNATURE: <i>Scott Valancy</i>		DATE: <i>6/4/08</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR		DATE	

REINSTATEMENT 07-08



7.6/5

H08000145089 3

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Thursday, June 05, 2008 10:54 AM Page 1 of 2

Page 282

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

From:
Account Name : CORPDIRECT AGENTS, INC.
Account Number : 110450000714
Phone : (850) 222-1173
Fax Number : (850) 224-1640

000466.88030

CORPORATION REINSTATEMENT

STS APPAREL CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$200.00

\$300.00, did not
receive prior notice.

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