

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1062

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 NOV 14 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000097663

1. Corporation Name

D & J LOGOS, INC.

Principal Place of Business

2323 FEATHER SOUND DR.
SUITE F107
CLEARWATER FL 33762-8002

Mailing Address

2323 FEATHER SOUND DR.
SUITE F107
CLEARWATER FL 33762-8002

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

N/A

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

N/A

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/19/1998

5. FEI Number

59-3544318

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	KAMENAR, JOHN	10200 GANDY BLVD N #1314	ST. PETERSBURG FL 33702
D	KAMENAR, DEBORAH	10200 GANDY BLVD N #1314	ST. PETERSBURG FL 33702
		2323 Feather Sound Dr	Clearwater FL 33762
		F107	
			608883487836-- -12/05/00--01075--012 ****150.00 ****150.00
			LS

8. Name and Address of Current Registered Agent

KAMENAR, JOHN
10200 GANDY BLVD N
UNIT #1314
ST. PETERSBURG FL 33702

9. Name and Address of New Registered Agent

Name

KAMENAR, JOHN

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

2323 Feather Sound Dr.

Suite, Apt. #, Etc.

Suite F107

City

Clearwater

State

FL

Zip Code

33762-8002

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

11. 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-6-00

Date

Daytime Phone #



The Hi-Tech Design People™

202
D&J Logos, Inc
D/B/A Your Logo
2035 E. Fowler Ave.
Tampa, Florida 33612
Phone: (813) 979-0215
Fax: (813) 979-0216
yourlogo2@aol.com

11-7-00

Dear Department of State,

I am writing you this letter to ask for reinstatement of our corporation. I was notified last week, via Notice of Administrative Dissolution or Revocation letter. I telephoned the appropriate department back in June 2000 regarding a change of address, not knowing that notices were sent prior to June 9, 2000. At that time, I was reassured that everything was taken care of and appropriately handled and we would receive our renewal.

I am asking that you please reinstate our corporation and understand that we made the appropriate attempt to keep our corporation in good standing with the Department of State of Florida. If you need any further information, please feel free to contact me.

Thank you for your patience and assistance in this matter.

Sincerely,

A handwritten signature in black ink that reads 'John Kamenar'. The signature is fluid and cursive.

John Kamenar