

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 DEC -8 PM 9: 07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

262502

1. Corporation Name

Nitram, Inc.

2. Principal Office Address

5321 Hartford Street

Suite, Apt. #, etc.

3. Mailing Office Address

Post Office Box 2968

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33619

Country

USA

Zip

33601

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

59-0995364

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

Scott A. Stichter

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

Stichter, Riedel, Blain & Prosser, P.A.

Suite, Apt. #, Etc.

110 East Madison Street, #200

City

Tampa

State

FL

Zip Code

33602

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

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

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
C/D/CEO	Steven E. Plotnick	950 Third Avenue, 25th Flr.	New York, NY 10022
S/T/D	Alex Reyter	950 Third Avenue, 25th Flr.	New York, NY 10022
D	Alex Nester	950 Third Avenue, 25th Flr.	New York, NY 10022
D	Edgar L. Davis	Will Dukes Road	Wauchula, FL 33873
D	Igor Olchanskiy	950 Third Avenue, 25th Flr.	New York, NY 10022
COO	Larry Shay	5321 Hartford Street	Tampa, FL 33619

10. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/5/03

813-626-2181

ext. 229

CR2E081 (10/02)

FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)  
CONTINUATION SHEET

DOCUMENT #262502

ENTITY NAME: NITRAM, INC.

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Officers and Directors:

D  
Alex Rovt  
950 Third Avenue  
25th Floor  
New York, NY 10022