

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 NOV 14 PM 1:40

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F01000000915

**1. Corporation Name**

The Berwyn Group Inc  
2908 W. Bay Court Ave  
Tampa, FL 33611

**2. Principal Office Address**

23215 Commerce Pk

Suite, Apt. #, etc.

215

City & State

Beechwood, OH

Zip

44122

Country

USA

**3. Mailing Office Address**

23215 Commerce Pk

Suite, Apt. #, etc.

215

City & State

Beechwood, OH

Zip

44122

Country

**4. Date Incorporated or Qualified** 10/10/91  
To Do Business in Florida 11/10/06 (NOV 1, 2006)

**5. FEI Number**

34-1672 337

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

Felix Federowicz

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

2908 W. Bay Court Ave

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33611

**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

*[Signature]*

Date 11/03/2006

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
Pres.	Felix Federowicz	2908 W. Bay Court Ave	Tampa, FL 33611

400081763454  
11/14/06--01049--005 \*\*1050.00

**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 contained in Chapter 119, 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]* Felix F. Federowicz

Date

11/3/2006 716-765-8818

Daytime Phone #