

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 NOV -4 PM 6:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F39520

1. Corporation Name

JOSEPH M. MURASKO, P.A.

Principal Place of Business

7125 SOUTH U.S. HWY. 17-92  
7125 SOUTH US HWY 17/92  
FERN PARK FL 32730  
US

Mailing Address

7125 SOUTH U.S. HWY. 17-92  
7125 SOUTH US HWY 17/92  
FERN PARK FL 32730  
US

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.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

06/04/1981

5. FEI Number

59-2095897

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	4 City / State / Zip
PVS	MURASKO, JOSEPH M	7125 S. U.S. HWY. 17-92	FERN PARK, FLORIDA 32730
TD	MURASKO, JOSEPH M	7125 S. U.S. HWY. 17-92	FERN PARK, FLORIDA 00000

7000008780857  
11/04/02--01057--015 \*\*150.00

8. Name and Address of Current Registered Agent

MURASKO, AGNES M  
123 PINE NEEDLE LANE  
ALTAMONTE SPRINGS FL 32714

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, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of  
Registered Agent

*x Agnes M Murasko*  
REGISTERED AGENT MUST SIGN

Date

10/29/02

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:

*Joseph M Murasko*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/29/02

Daytime Phone #

407 852 7259  
407 436 3611

CR2E040 (8/02)

**Joseph M. Murasko, P.A.**  
**Attorney at Law**  
**7125 South U.S. Highway 17-92**  
**Fern Park, Florida 32730**

Phone (407) 831-0188

Email: [Joemurasko@hotmail.com](mailto:Joemurasko@hotmail.com)

Alternate phone (407) 463-3611

October 29, 2002

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Reinstatement**

Sirs:

Enclosed is Document #F39520 and my check for \$150 my annual fee.

Although I was wary of doing it electronically, but at the suggestion of your office, I undertook to register and pay my fee on the internet and pay with a credit card, asking for confirmation that everything was received. This was done in a timely manner before any penalty would apply. I did not receive a reply from your office, but on reflection I thought that with the thousands of communications you received each day it may not have been practical to reply to my request.

Consequently, I am sending only the standard fee, without penalty, asking you to waive any penalties or late fees.

If this is not acceptable and you cannot reinstate this corporation for the standard fee, please return my check, and we will leave the corporation dissolved.

If there is going to be electronic registration and payment, it seems your programs need to be modified to provide the sender with an acknowledgment.

Very truly yours,

  
Joseph M. Murasko