

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 DEC 19 AM 8:00

DOCUMENT # F52496

1. Corporation Name

Royal Heritage Company Inc.

REINSTATEMENT 03

400025650484
12/19/03--01055--020 **150.00
MRD

2. Principal Office Address

427 E. Tarpon Ave.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

114

Suite, Apt. #, etc.

City & State

Tarpon Springs, Florida

City & State

Zip

34689

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

11/4/1981

5. FEI Number

59-2253630

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

Nora Schmidt

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

427 E. Tarpon Ave.

Suite, Apt. #, Etc.

114

City

Tarpon Springs

State
FL

Zip Code
34689

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]
REGISTERED AGENT MUST SIGN

Date

12/10/03

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
P/S	Alex Broumand	427 E. Tarpon Ave., # 114	Tarpon Springs, FL 34689

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

12/10/03

Daytime Phone #

407-423-4400

CR2E081 (10/02)

282

Royal Heritage Company Inc.

12/10/03

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Fl. 32399

To whom it may concern:

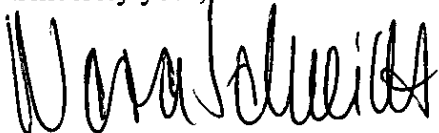
In the early part of 2003 we filed our annual report with the State Department as required. For some reason it was returned to us for some incorrect information. But you kept the check for \$150.00. The form was returned corrected, but somehow the check and the form never "found" each other.

In September you dissolved the corporation and we are asked to pay now reinstatement fees.

We feel that it is not entirely fair and ask you to waive the reinstatement fee.
We are enclosing \$150.00 for the filing fee for 2003.

We hope we can count on your help and cooperation.

Sincerely your,



Nora Schmidt
Registering Agent.