

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 JUN 11 AM 7:47

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # F98 000001602

1. Corporation Name

INTAKOASTAL, INC.

2. Principal Office Address

1515 W. 22ND ST.

Suite, Apt. #, etc.

SUITE 750

City & State

OAK BROOK ILLINOIS

Zip

60181-4796

Country

USA

3. Mailing Office Address

3909 N.E. 163RD ST.

Suite, Apt. #, etc.

SUITE 300

City & State

NO. MIAMI BEACH, FLORIDA

Zip

33160

Country

USA

REINSTATEMENT 02-04

4. Date Incorporated or Qualified
To Do Business in Florida

3/20/98

5. FEI Number

36-4214290

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

CHARLES J. GRIMSLEY

900038015799

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

3909 N.E. 163RD ST.

Suite, Apt. #, Etc.

SUITE 300

City

NORTH MIAMI BEACH

State

FL

Zip Code

33160

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

Charles J. Grimsley

REGISTERED AGENT MUST SIGN

Date JUNE 4, 2004

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
PCD	RICHARD P. PARRILLO, JR.	3909 N.E. 163 RD ST.	NO MIAMI BEACH, FL 33160
VD	MICHAEL W. PARRILLO	1515 W. 22 ND ST.	OAK BROOK, ILL 60181
SD	TRACEY PARRILLO	1515 W. 22 ND ST.	OAK BROOK, IL 60181

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:

RICHARD P. PARRILLO, JR.

6/4/04

305-933-5835

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)