

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # K29763**

1. Corporation Name

Fillette, Green & Co. of Tampa, Inc.

2. Principal Office Address

3333 W. Kennedy Blvd.

3. Mailing Office Address

3333 W. Kennedy Blvd.

Suite, Apt. #, etc.

#207

Suite, Apt. #, etc.

#207

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33609

Country

U.S.A.

Zip

33609

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 07/28/1988

5. EEL Number

592747995

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

Allen von Spiegelfeld

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

501 East Kennedy Blvd.

Suite, Apt. #, Etc.

Suite 1700

City

Tampa

State

FL

Zip Code

33602

**REINSTATEMENT**

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

Date January 19, 2006

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/D	Robert N. Pundsack	3333 W. Kennedy Blvd., #207	Tampa, FL 33609
S/D	Allen von Spiegelfeld	501 E. Kennedy Blvd., Suite 1700	Tampa, FL 33602

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:

Allen von Spiegelfeld

January 19, 2006 813-222-1135

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 822728 4326591

AUTHORIZATION :

COST LIMIT : \$ 1200

ORDER DATE : January 20, 2006

ORDER TIME : 9:20 AM

ORDER NO. : 822728-005

CUSTOMER NO: 4326591

DOMESTIC FILINGS

NAME: FILLETTE, GREEN & CO. OF TAMPA  
INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XXX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Harry B. Davis - Ext# 2926

EXAMINER'S INITIALS \_\_\_\_\_

RECEIVED  
06 JAN 20 AM 10:47  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA