

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
97 JAN 27 AM 8:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # K49994

1. Corporation Name

THEO, CO.

Principal Place of Business	Mailing Address
11120 SW 121 Street Miami, Florida 33176	11120 SW 121 Street Miami, Florida 33176

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable
<u>11120 SW 121 Street</u> Suite, Apt. #, etc.	<u>11120 SW 121 Street</u> Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

Applied For  
 Not Applicable

City & State	City & State
<u>Miami</u> Zip <u>33176</u> Country <u>USA</u>	<u>Florida</u> Zip <u>33176</u> Country <u>USA</u>

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	Evan Caracostas	11120 SW 121 Street	Miami, FL 33176
R/D	Mavis Caracostas	11120 SW 121 Street	Miami, FL 33176
			200002073752--2 -01/30/97--01058--013 ***375.00 ***375.00
			BI-28-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Mavis Caracostas  
11120 SW 121 Street  
Miami, FL 33176

Name  
Mavis Caracostas  
Street Address (P.O. Box Number is Not Acceptable)  
11120 SW 121 Street  
Suite, Apt. #, Etc.  
City  
Miami State  
FL Zip Code  
33176

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.

Signature of Registered Agent

Mavis Caracostas

Date

1/10/97

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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

Mavis Caracostas

Date

1/10/97

Daytime Phone #

(305) 238-9584

CPRE040 (12/95)