

192

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2002 2003
LIMITED LIABILITY
COMPANY

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY 22 AM 10:03

DOCUMENT # **LO1000000577**

1. Limited Liability Company's Name

TREASURE ISLAND ENTERPRISES LLC.

800019732808
05/22/03--01013--011 **100.00

2. Principal Office Address

14544 BRADDOCK OAK DR.

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

ORLANDO

City & State

FL.

Zip

32837

Country

USA

Zip

Country

4. State/Country of Formation

Florida / USA

5. Date Organized or Qualified
To Do Business in Florida

6. FEI Number

593690227

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

DAVID NASSIF

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

14544 BRADDOCK OAK DR.

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32837

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Date **April 28, 2003**

REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Pres.	DAVID NASSIF	14544 BRADDOCK OAK DR.	ORLANDO, FL. 32837

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company 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 of
Managing Member/Manager

Date **April 28**

Daytime Phone # **407 850-6866**

Typed or printed name of signing Managing Member/Manager

DAVID NASSIF

CR2E041 (10/02)

YOU HAVE WRONG ADDRESS

20/2

LISTED, I DID NOT GET
ANNUAL REPORT! THE

CORRECT ADDRESS IS :

TREASURE ISLAND ENTERPRISES LLC.

14544 BRADDOCK OAK DR.

ORLANDO, FL. 32837

↑
YOU HAD
(WRONG ZIP CODE)
ON RECORDS