PLEASE R'A'

APPLICATION

L INSTRUCTIONS BEFORE COMPLETING THIS FORM.
FLORIDA DEPARTMENT OF STATE

Jim Smith.

Secretary of State

DIVISION OF CORPORATIONS

**DOCUMENT #** 

FQR

REINSTATEMENT

N40293

1. Corporation Name

VISION YISRAEL, INC.

Principal Place of Business

Mailing Address

700 COLUMBUS WAY LONGWOOD FL 32750

700 COLUMBUS WAY LONGWOOD FL 32750

FILED

02 DEC 20 AM 10: 45

TALLAHASSEE, FLORIDA



If above a	addresses are	incorrect in any way, line	through incorrect i	information and	enter correction below.				
New Principal Office Address, If Applicable 3. No.				lew Mailing Office Address, If Applicable		Date Incorporated or Qualified     To Do Business in Florida     10/10/1990			
Suite, Apt.	#, etc.		Suite, Apt. #	Suite, Apt. #, etc.  City & State		5. FEI Number Applied For			
City & Stat	e		City & State				<b>59-3058442</b> Not Appl		
Zip	-	Country	Zip -		Country	6. CERTIFICATI		75 Additional Fee required for a Certificate of Status	
7. Names	and Street Add	dresses of Each Officer a	nd/or Director (Fl	orida nonprofit	corporations must list at	least 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip		
D	PERMISON, HARVEY			700 COLUMBUS WAY			LONGWOOD FL		
D	CONNER, ROGER W III			7919 SLOEWOOD DR			MT DORA FL		
D	D ROTH, SIDNEY			1829 DIXON LN			ST SIMON ISLAND FL		
				A (2/2)		11/06/1	11/06/0201035007 **70.00 800008819558 11/06/0201035007 **70.00		
•					P	117 007	02 01000 001	** 10:00	
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent			
PERMISON, HARVEY 700 COLUMBUS WAY "L'ONGWOOD FL' 32750"				_	Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.				
					City	· <del>-</del>	Star FI		
10. I, bein	<del>,</del>	e registered agent of the	above named corp		niliar with and accept the	e obligations of Sect	tion 607.0505, F.S. or 617.05	_	

11. 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:

SUNDING CHECK OF BUSINESS OFFICER OF DIRECTOR

REGISTERED AGENT MUST SIGN

10-3/-62 407332-900

, .

CR2E040 (8/02)



## **CONGREGATION SHALOM YISRAEL**

"Arise! Shine. For thy light is come, and the glory of the Lord is risen upon thee."

Isaiah 60:1

Harvey Permison Messianic Rabbi

10-31-02

DEAN SIRS;

I PRICENTLY PRICIPUED & CORP LETTERS OF

DISSOLUTION. I WAS OBVIOUSLY SUPPRISED AS I

DO NOT PRICALL PRICIPULAL EITHER NOTICE OR

THE AND NOTICE. BOTH CORP PRINEWALS USUALLY

ARRIVE AT THE SAME TIME. I SPOKE TO SOMEBODY

IN YOUR DEAT AND THEY SAID TO FORWARD A LETTER

THAT THEY WOULD WAVE THE LATE FEE. I AM ENCLOSING

THE FEE FOR BOTH CORP.

Very much

12-17-02

1) 7.17 5/25

This is A copy of my original LETTER The PERSON

I SPOTIL WITH Spip. IT MUST HAVE GOTTEN FILTED WITH

CONG SHALOM YISRARL AND NOT VISIGN YIS AREL AND TO SUND

YOUR COPY.

PO Box 151569 • Altamonte Springs, Florida 32715-1569 • Phone (407) 332-9000 • Fax (407) 332-9100