

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 NOV 19 PM 3:05

DOCUMENT # P00000093190

1. Corporation Name

T.M. PROPERTY SERVICES, INC.

Principal Place of Business

Mailing Address

4179 38TH WAY S
ST. PETERSBURG FL 33711

4179 38TH WAY S
ST. PETERSBURG FL 33711



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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10/03/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

57-1110877

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
PRES.	Kenneth D. Phelps	4179-38th Way South	St. Petersburg, FL 33711
VICE PRES.	Michael D. Phelps	4179-38th Way South	St. Pete, FL 33711
SEC/TREAS	Luella J. Phelps	4179-38th Way South	St. Pete, FL 33711

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KLIPSTEIN, CHANDRA
C/O THOMPSON GOODIS, ET. AL.
333 3RD AVENUE N - 4TH FLOOR
ST. PETERSBURG FL 33701

Name
Carolyn Phelps
Street Address (P.O. Box Number is Not Acceptable)
4179-38th Way South
Suite, Apt. #, Etc.
City
St. Petersburg
State
FL
Zip Code
33711

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

Date 11-16-01

REGISTERED AGENT MUST SIGN

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

200004706162--5

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****158.75 ****158.75

11-16-01 727-906-8984

TM PROPERTY SERVICES, INC.
4179 38TH WAY SOUTH
ST. PETERSBURG, FL 33711
PHONE: 727-906-8884 FAX: 727-906-4954

November 16, 2001

Ms. Katherine Harris, Secretary of State
Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314


Dear Ms. Harris:

We did not receive a Uniform Business Report to file. Therefore, we have enclosed our fee in the amount of \$150.00.

I have also requested a certificate of status and have enclosed the additional \$8.75.

Thank you for your assistance in this matter. Should you have any questions please contact me at the above address and phone number.

Sincerely,


Carolyn Phelps

Encl.

2001-UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000069253

1. Entity Name

ITG INTERNATIONAL TRADING GROUP INC.

Principal Place of Business

80 SW 8TH STREET
SUITE 2063

Mailing Address

SAME

MIAMI - FLORIDA 33130

2. Principal Place of Business

N/A

3. Mailing Address

N/A

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1051094

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

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****158.75 ****158.75

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name JOSEPH HNEICH

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

80 SW 8TH STREET SUITE 2063

City MIAMI - FL

FL

Zip Code 33130

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reissuing)

10/31/01

DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001, Fee will be \$550.00

State Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE P/D
NAME JOSEPH HNEICH
STREET ADDRESS 9631 FONTAINEBLEAU BLVD #114
CITY-ST-ZIP MIAMI - FLORIDA 33132

☐ Delete

TITLE S/D
NAME GEORGES HNEICH
STREET ADDRESS 1530 SPRING GATE DR #9214
CITY-ST-ZIP MCLEAN - VA 22102

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/01

(305) 551 6208

Director Phone #

CR2E034 (11/00)

October 31, 2001

Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: ITG International Trading Group, Inc.

Dear Sir/Madam:

We are requesting that the Reinstatement fee be waived on this corporation because at no time did we receive an Annual Report from CT Corporation even though our fees to them remain current. For this reason, we have changed the registered agent as noted on the Annual Report enclosed. Since we will be receiving the annual report directly from now on, we will avoid any future delinquencies.

Thank you for your consideration in this matter.

Sincerely,



Joseph Hneich,
President