

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 APR 29 PM 3:34

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000100564

1. Corporation Name

Essington Company, Inc.

2. Principal Office Address

8851 SW 52 Street

Suite, Apt. #, etc.

3. Mailing Office Address

801 Brickell Bay Drive

Suite, Apt. #, etc.

Apt. 150A

City & State

Miami, Florida

City & State

Miami, Florida

Zip

33165

Country

USA

Zip

33131

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

10/25/00

5. FEI Number

651056651

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

Carlos Ramon Ramos

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

3383 NW 7 Street

Suite, Apt. #, Etc.

# 207

City

Miami,

State

FL

Zip Code

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

Carlos R. Ramos REGISTERED AGENT MUST SIGN

Date

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
D	Vasilio Maheroudis	801 Brickell Bay Dr. # 150A	Miami, Florida 33131

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 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 #

Vasilio Maheroudis

2/19/02

CR2E081 (9/01)

ESSINGTON COMPANY, INC.  
8851 SW 52 Street  
Miami, Florida 33165

February 19, 2002

Secretary of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314


RE: Essington Company, Inc.  
Document Number: P00000100564

Dear Sir or Madam:

This letter is a request for a waiver of the corporate reinstatement fee for the above corporation. The annual reports for 2001 and 2002\* were never received. Therefore, we respectfully request that the fee be waived.

\*and the change of registered agent  
notification and form

Sincerely,



Vasilio Maheroudis  
President