

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -5 AM 9:49

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P00000102598**

1. Corporation Name

BODY TANNING, INC.

Principal Place of Business

Mailing Address

8921 W. ATLANTIC BLVD.
STORE #R
CORAL SPRINGS FL 33071

8921 W. ATLANTIC BLVD.
STORE #R
CORAL SPRINGS FL 33071

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

03



200024457712
11/05/03--01059--027 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

11/01/2000

5. FEI Number

65-1052594

Applied For

Not Applicable

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	RHODIS, NICHOLAS J	8921 W. ATLANTIC BLVD.	CORAL SPRINGS FL 33071
V	PIRCALABU, TRAIAN	8921 W. ATLANTIC BLVD.	CORAL SPRINGS FL 33071

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RHODIS, NICHOLAS
6011 NW 58TH WAY
PARKLAND FL 33067

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11/3/03

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

11/3/03 954822295

Daytime Phone #

CR2E040 (7/03)

Body Tanning Inc.
8921 W. Atlantic Blvd. – Store # R
Coral Springs, FL 33071

October 31, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

I Ask that the penalty for the failure to file an annual report be waved. The taxpayer never received the renewal form. The penalty will create a hardship for my business and I ask that you please waive it.

Enclosed is my reinstatement form with my fee of \$150.00 for the year 2003.

Thank you very much for your help and understanding.

Sincerely,


Nicholas Rhodis