

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATE
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 OCT -5 PM 1:16

DOCUMENT #

P00000107480

1. Corporation Name

Taylor Development, Inc.

2. Principal Office Address

598 Burlwood Terr.

3. Mailing Office Address

2471 McMullen Booth

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#305

City & State

Tarpon Springs, FL.

City & State

Clearwater, FL.

Zip

34688

Country

USA

Zip

33759

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/17/00

5. FEI Number

593682367

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

Spiegel & Utrera Pa

800004638348-7

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

343 Almeria Ave

10/16/01-01036-008

****150.00 ****150.00

Suite, Apt. #, Etc.

City

Coral Gables

State

FL

Zip Code

33134

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

[Signature]

Date

10-3-01

REGISTERED AGENT MUST SIGN

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
P	Nicholas Braia	598 Burlwood Terr.	Tarpon Springs, FL - 34689
S	"	"	"
T	"	"	"
	"	"	"
	"	"	"
	"	"	"
	"	"	"

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-3-01 727-420-6907

Daytime Phone #

CR2E081 (9/00)

Taylor Development, Inc.

2471 McMullen Booth Rd. #305

Clearwater, FL 33759

727-791-9177

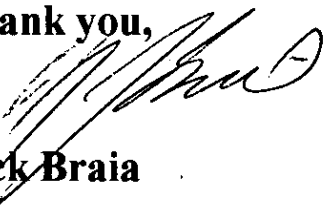
To Whom It May Concern:

Sending in the reinstatement form because I never received any paper work for the 01' filling. Maybe it was sent to the registered agent and they never informed me.

I sent paperwork for a fictitious name and it came back to me and this is how I found out about the filling.

Please accept my apology, and the \$150 is enclosed

Thank you,



Nick Braia