

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 JUL 29 AM 10:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

P00000112866

1. Corporation Name

NICOLAS I, inc

**REINSTATEMENT** 03-04

000039696150 WOP  
07/29/04--01046--009 \*\*300.00

2. Principal Office Address

7944 NW 62nd WAY

3. Mailing Office Address

7944 NW 62nd WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PARKLAND, FLORIDA

City & State

PARKLAND, FLORIDA

Zip

33067

Country

USA

Zip

33067

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

12/08/2000

5. FEI Number

651061558

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

SANTINI Nicolas

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

7944 NW 62nd WAY

Suite, Apt. #, Etc.

City

PARKLAND

State

FL

Zip Code

33067

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

REGISTERED AGENT MUST SIGN

Date 07/26/2004

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
DP	SANTINI Nicolas	7944 NW 62nd WAY	PARKLAND FLORIDA 33067
PV	SANTINI Marie - Sose	7944 NW 62nd WAY	PARKLAND FLORIDA 33067
DS	SANTINI Claude	7944 NW 62nd WAY	PARKLAND FLORIDA 33067

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:

Nicolas SANTINI

07/26/2004 561-715-9285

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E061 (01/04)

202

NICOLAS I, Inc  
7944 NW 62<sup>nd</sup> Way  
PARKLAND, FL 33067

FLORIDA DEPARTMENT OF STATE  
Division of corporation  
P.O. Box 6327  
TALLAHASSEE, FL 32314

Dear Sirs,

we are writing to you because we didn't receive any paperwork pertaining to the renewal of our corporation for the year 2004.

In 2003 we had not received the form for the renewal of our corporation, we called your office and were told to send a letter explaining the situation and a check for the renewal fee of \$ 150.00; we sent the letter and the check shortly after that phone conversation.

We realized in June of 2004 that we hadn't received the form for 2004 either. After calling your office in June of 2004, we were told that no actions had been taken on your part as per the renewal of our corporation in 2003 and that we needed to send you an other letter explaining the situation and a check for \$ 300.00 for the fee of 2003 and 2004.

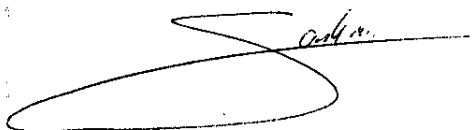
We would like you to reinstate our corporation, NICOLAS I, inc, and are sending you a check in the amount of \$ 300.00 for the years 2003 and 2004.

We haven't had the time to go through our records yet to see if you cashed the \$ 150.00 check that we sent you in 2003 for the year 2003.

If you received that check and didn't cash it yet, would you please, after cashing the present check for \$ 300.00 for the years 2003 and 2004, return to us that \$ 150.00 check sent to you in 2003 at the following address 7944 NW 62<sup>nd</sup> Way, PARKLAND, FL 33067.

In the meantime, we will do research through our records to see if that check was cashed or not and if so, we will send you a letter with a copy of the check attached for you to reimburse that \$ 150.00 check.

If any questions you can contact us by phone at 561-715-9285 or by mail at 7944 NW 62<sup>nd</sup> Way PARKLAND, FLORIDA 33067.



Nicolas SANTINI. 07/26/2004