

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 DEC 10 PM 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000000418

1. Corporation Name

Tao, Inc.

REINSTATEMENT 03

700024772337
11/18/03--01005--004 **150.00

2. Principal Office Address

4435 Beauchamp Court

Suite, Apt. #, etc.

City & State

Sarasota

Zip

FL

Country

34243

3. Mailing Office Address

PO Box 49047

Suite, Apt. #, etc.

City & State

Sarasota

Zip

FL

Country

34230

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-1070101

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

W. Lee Fjelstad

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

4435 Beauchamp Court

Suite, Apt. #, Etc.

City

Sarasota

State

FL

Zip Code

34230

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

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
President	W. Lee Fjelstad	4435 Beauchamp Court	Sarasota, FL 34230

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)(l), 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:

W. Lee Fjelstad

11/13/2003 888-255-5353

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)



The Verbal Judo Institute, Inc.

P.O. Box 49047
Sarasota, Florida 34230

Toll Free 888-255-5353
Fax Toll Free 888-255-8141
www.verbal-judo.com

Dr. George J. Thompson,
President and Founder

W. Lee Fjelstad,
Vice President

Florida Department of State
Division of Corporations
PO Box 1500
Tallahassee, FL 32302-1500

November 13, 2003

Division of Corporations Auditor;

Re: Tao, Inc

Federat Tax ID: 65-1070101
Document #: P01000000418

I just finished a phone conversation with a your lady at your offices who informed me of the process I need to follow to reinstate my corporation in Florida.

I travel over 300 days annually and returned home after a three week trip to find a letter from a government agency in California stating my Federal ID was not being accepted. After an investigation and several phone calls I find that the annual fee for your department was not received.

I received no notice of renewal although after speaking with your offices the mailing address was correct at PO Box, 49047, Sarasota, FL 34230. I was instructed to download the reinstatement form, complete it and mail it with a check for \$150.00 and this letter. I have been informed that the next payment for 2004 will be due in January and I will receive a post card at the address above. I also understand that I can check online and renew there in the event I do not receive the notice.

I can be reached at 888-255-5353 if there are further items I need to complete by your request.

Thank you for your consideration in this matter.

My Regards



W. Lee Fjelstad