

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS



REINSTATEMENT

FILED

02 DEC -4 PM 3:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000015342

1. Corporation Name

MARFIN INC.

Principal Place of Business

Mailing Address

~~15940 NW 83RD AVE  
MIAMI LAKES FL 33016~~

~~15940 NW 83RD AVE  
MIAMI LAKES FL 33016~~



800009344408

12/04/02--01003--013 \*\*158.75

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

6630 INDIAN CREEK DR

3. New Mailing Office Address, If Applicable

6630 INDIAN CREEK DR

4. Date Incorporated or Qualified  
To Do Business in Florida

02/09/2001

Suite, Apt. #, etc.

APT # 216

Suite, Apt. #, etc.

APT # 216

City & State

MIAMI BEACH, FL

City & State

MIAMI BEACH, FL

Zip

33141

Country

USA

Zip

33141

Country

USA

5. FEI Number

65-1080726

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	ROVATSOS, DEMETRIUS	15940 NW 83RD AVE	MIAMI LAKES FL 33016
		6630 INDIAN CREEK DR APT # 216	MIAMI BEACH FL 33141

8. Name and Address of Current Registered Agent

ROVATSOS, DEMETRIUS

15940 NW 83RD AVE

MIAMI LAKES FL 33016

6630 INDIAN CREEK DR APT 216

MIAMI BEACH, FL 33141

9. Name and Address of New Registered Agent

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

SIGNATURE REQUIRED  
Demetrius Rovatsos

REGISTERED AGENT MUST SIGN

Date 11/27/02

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 REQUIRED  
Demetrius Rovatsos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DEMETRIUS ROVATSOS 11/27/02 (305) 9873400

Date

Daytime Phone #

CR2E040 (8/02)

MARFIN INC  
6630 Indian Creek Dr. Apt.216  
Miami Beach, FL 33141

November 27, 2002

Division of Corporations  
Annual Report/Reinstatement section  
PO Box 6327  
Tallahassee, FL 32314-6327

Dear Sirs,

Kindly note that prior UBR notices have not been received.

Regards

A handwritten signature in black ink that reads "Demetrius Rovatsos". The signature is written in a cursive, slightly slanted style.

Demetrius Rovatsos - Director  
Marfin Inc.