

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 MAR 30 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PO1000045762**
1. Corporation Name
TAHITIAN GOLD SUN SPA, INC.

2. Principal Office Address
10954 N. 56TH ST.

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
TAMPA, FL

City & State

Zip Country
33617-3004 USA

Zip Country

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida **05/2001**

5. FEI Number
593715049

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
LISA NUSMAN

Street Address (R.O. Box Number is Not Acceptable)
10954 N. 56TH ST.

Suite, Apt. #, Etc.

City
TAMPA,

State
FL

Zip Code
33617-3004

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

Date

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
PVST	LISA NUSMAN	10954 N. 56TH ST.	TAMPA, FL 33617-3004

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 contained in Chapter 119, 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

Daytime Phone #

03/17/06 813-983-8000

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Tahitian Gold Sun Spa, Inc.

10954 N. 56th St.. * Tampa * Florida * 33617-3004

February 13, 2005

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

Re: FEI 593715049

Dear Sir or Madam:

I am uncertain how my corporation became inactive. I assume that it is because I changed my address in 2003 and failed to let you know. It seems that my notice to renew my corporation was lost in the mail in previous years. As I didn't receive any notices, I will enclose a check for \$600 for reinstatement fees. Enclosed is the form to reinstate my corporation. This form has my current address on it. Thank you.

Sincerely,

Lisa Nusman
Tahitian Gold Sun Spa, Inc. - President