## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	FLE	MOE KEAD I	ALL INSTIN	SCHORO BEI CIRE	_	10 11				
CORPORATION REINSTATEMENT			FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		04	FILED 04 JAN 27 AM 11: 48				
DOCUMENT # P01000051846  1. Corporation Name					SE TAL	CRETA LAHAS	RY OF STATE SSEE, FLORE	: DA		
Ame	ri-Park Park	king Systems	inc.							
2. Principal Office Address 2740 SW Martin Downs Blvd			3. Mailing Office Address Same		20 01/27	<b>200</b> ; 704	2 <b>765</b> 39 01017015	922 **450.0	0 07 -	
Suite, Apt. #.		2011110 21110	Suite, Apt. #, etc.		_				0	
255					4. Date Incorporated or Qualified To Do Business in Florida May 18, 2001					
City & State	~ =ı		City & State		5. FEI Numbe	r		Applied	For	
Palm City, FI			Zip Country		65-1107133			Not App	licable	
<sup>Zip</sup> 34990		rtin	Zip	Country	6. CERTIFICATE	OF STATUS		Additional Fee r a Certificate of S		
			7. Nam	e and Address of Current Registe	ered Agent					
	Name Corv	Pantelakis								
	·····	P.O. Box Number is N	ot Acceptable)	40 SW Martin Down	BEI	5	ATEME	NT		
	Suite, Apt. #, Etc			40 SW Marun Down	S DIVU				Andrew State of Street	
	255					1 - 1				
	<sup>City</sup> Palm City					FL State	Zip Code 34990			
8. I, being	appointed the regist	tered agent of the abo	ove named corporat	ion, am familiar with and accept the	obligations of section	on 607.050	5 or 617.0503, F.S.		CR2E081 (10/02)	
Signature of CLP						Date	1/7/04		2E081	
Registered /	Agent	R	EGISTERED AGEN	IT MUST SIGN	· · · · · · · · · · · · · · · · · · ·	Daio_			<u> </u>	
9. Names	and Street Address	es of Each Officer an	d/or Director (Florid	a nonprofit corporations must list at	least 3 directors)					
Titles	Offi	Name of cers and/or Directors	;	Street Address of Ea Officer and/or Direct						
Р	Cory Pantelakis		2740 SW Martin Downs		Blvd #255 Palm City, Fl 34		City, FI 34990			
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	<u></u>								-	
this rei owed t on this	instatement application the corporation has application is true a	ion, the reason for dis ave been paid and the	solution has been e names of individua signature shall have	owered to execute this application a liminated, the corporate name satisfies listed on this form do not qualify for the same legal effect as if made un	ies the requirement or an exemption und der oath.	s of section	i 607.0401 or 617.040 119.07(3)(i), F.S. The	1, F.S., that all f	ees	
SIGNA.	SIGNAT	URE AND TYPED OR P		ONING OFFICER OR DIRECTOR		Date		ne Phone #	_	



To Whom It May Concern:,

I, Cory Pantelakis, never received any paperwork (Annual Report) in 2002 to file and as a result I have recently discovered that my Corporation is inactive.

In 2001 I had some partners and split with them retaining ownership of the Corporation and their attorney was the original Registered Agent for the corporation and he never forwarded the Annual Report if he received it.

I contacted someone in the Reinstatement department and they informed me that you needed this letter, the reinstatement form along with a check for \$150 for 02, 03 and 04 totaling \$450.00.

If you need to reach me for any reason please contact me as soon as possible so that I may rectify this matter quickly.

Thank you.

Sincerely Yours,

Cory Pantelakis

Ameri-Park Parking Systems, Inc.

(561) 445-9438