

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

02 OCT 16 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000070297

1. Corporation Name

Krasun Industries, Inc.

2. Principal Office Address

515 Seabreeze Blvd.

3. Mailing Office Address

515 Seabreeze Blvd.

Suite, Apt. #, etc.

Suite 202

Suite, Apt. #, etc.

Suite 202

City & State

Ft. Lauderdale, Florida

City & State

Ft. Lauderdale, Florida

Zip

33316

Country

USA

Zip

33316

Country

USA

REINSTATEMENT

2002

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

7-17-01

5. FEI Number

14-1849010

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

Gregory S. Starr, Esq.

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

515 Seabreeze Blvd.

Suite, Apt. #, Etc.

Suite 220

City

Ft. Lauderdale

State
FL

Zip Code

33316

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 10-13-02

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
PD	Michael J. Krasun	515 Seabreeze Blvd.	Ft. Lauderdale, Florida 33316

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres.

10/13/02

Date

254-253-8496

Daytime Phone #

CR2E081 (9/01)

FT. LAUDERDALE

515 Seabreeze Boulevard
Suite 220
Fort Lauderdale, Florida 33316
(954) 779-7827
(954) 713-8138 (facsimile)
e-mail: gregorystarr@msn.com
Web Site: <http://www.gregorystarr.com>

Law Offices of

GREGORY S. STARR, P.A.
A Professional Association

Please respond to:
Ft. Lauderdale

BOCA RATON

433 Plaza Real
Suite 275
Boca Raton,
Florida 33432
(877) 779-7827

MIAMI

155 South Miami Avenue
Penthouse
Miami, Florida 33130
(305) 933-0470
(305) 371-4888 (Espanol)

15 October 2002

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee FL 32399

Transmitted Via:

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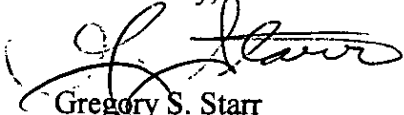
RE: KRASUN INDUSTRIES, INC.
Document Number P01000070297

To whom it may concern:

Enclosed please find a completed and executed Corporation Reinstatement form for Krasun Industries, Inc., along with an attorney trust check in the amount of \$750.00.

Please reinstate said corporation as soon as possible. Thank you for your assistance.

Yours Truly,


Gregory S. Starr
Attorney At Law

Enclosures

cc: Michael J. Krasun