

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 21 PM 1:21

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 901000027325

1. Corporation Name

Versatile Finance & Investments,
Inc.

REINSTATEMENT 03

2. Principal Office Address

5810 Biscayne Blvd

Suite, Apt. #, etc.

#2

City & State

Miami FL

Zip

33137

Country

USA

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Same

City & State

Same

Zip

Same

Country

Same

000023961090
10/21/03--01017--026 **150.00

4. Date Incorporated or Qualified
To Do Business in Florida

08-07-2001

5. FEI Number

46-0463894

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

Tracy Powell

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

5810 Biscayne Blvd #2

Suite, Apt. #, Etc.

#2

City

Miami

State

FL

Zip Code

33137

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

Tracy Powell
REGISTERED AGENT MUST SIGN

Date

10/16/03

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
Pres.	Tracy Powell	5810 Biscayne Blvd #2	Miami FL 33137

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:

Tracy Powell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/16/03

Daytime Phone #

607.754.0086

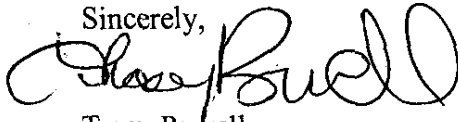
21 10/22

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

To Whom It May Concern:

This letter is in reference the dissolution of my corporation Versatile Finance & Investments. The mailing address listed for this corporation was 1542 Drexel Avenue Unit 306, Miami Beach FL 33139. I moved from that address on November 2002 and this documentation was never forwarded to my new address, therefore, the Corporation Reinstatement Document was never received. Enclosed is my check for \$150.00 to remove the dissolution status from my corporation. Thank you.

Sincerely,



Tracy Powell