

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 17 PM 12:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000089161

1. Corporation Name

THANH THAO, INC.

Principal Place of Business

3033 - 54TH AVENUE NORTH
ST. PETERSBURG FL 33714

Mailing Address

3033 - 54TH AVENUE NORTH
ST. PETERSBURG FL 33714

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/11/2001

5. FEI Number

59-3744953

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PTD	TRAN, THAO T	3033 - 54TH AVENUE NORTH	ST. PETERSBURG FL 33714
VSD	LE, LOC T	903 HAWKINS STREET	CLEARWATER FL 33756

900023907729
10/17/03 01058 017 **750.00

8. Name and Address of Current Registered Agent

ROBERTS, DAVID H ESQ. ---
6570 - 30TH AVENUE NORTH
ST. PETERSBURG FL 33710

9. Name and Address of New Registered Agent

Name

THAO T TRAN

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

3033 54th AVE. N.

Suite, Apt. #, Etc.

City

St. Petersburg FL 3371

State

FL

Zip Code

33714

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
REGISTERED AGENT MUST SIGN

Date 10/14/03

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/14/03

Daytime Phone #

CP2E040 (7/03)