

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 SEP 17 AM 8:00

DOCUMENT # P01000095649

1. Corporation Name

5th Street Holding Company, Inc.

2. Principal Office Address

116 5th Street South

Suite, Apt. #, etc.

3. Mailing Office Address

16805 U.S. Hwy 19 N.

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

Clearwater, FL

Zip

33701

Country

USA

Zip

33764

Country

USA

REINSTATEMENT

03-04
MRB

4. Date Incorporated or Qualified
To Do Business in Florida

10/01/2001

5. FEI Number

30-0068978

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

Tony Amico

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

16805 U.S. Hwy 19 N.

Suite, Apt. #, Etc.

City

Clearwater

State

FL

Zip Code

33764

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 9-15-04

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
P	Tony Amico	16805 U.S. Hwy 19 N.	Clearwater, FL 33764

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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-15-04 727-535-7558

Date

Daytime Phone #

CR2E081 (01/04)

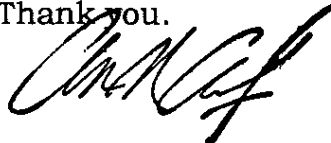
282
September 15, 2004

To: Division of Corporations
From: Anthony Amico
Re: 5th Street Holding Company, Inc.
Document #P01000095649

It was just brought to our attention that the above-referenced corporation was dissolved for non-renewal in 2003.

Enclosed please find the completed reinstatement application along with a check in the amount of \$300.00 for 2003 and 2004 renewals. We never received a renewal application and, therefore, request that the penalty be waived.

Thank you.



Anthony N. Amico