

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Page 1 of 2*

APPLICATION FOR REINSTATEMENT

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

DOCUMENT # P01000111775

1. Corporation Name

VICTOR SIRGADO, INC.

Principal Place of Business

Mailing Address

7940 WEST DRIVE
21
NORTH BAY VILLAGE FL 33141

7940 WEST DRIVE
21
NORTH BAY VILLAGE FL 33141

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

2. New Principal Office Address, If Applicable

600 NE 36TH STREET

3. New Mailing Office Address, If Applicable

600 NE 36TH STREET

Suite, Apt. #, etc.

STE. 1621

Suite, Apt. #, etc.

STE. 1621

City & State

MIAMI, FL.

City & State

MIAMI, FL.

Zip

33137

Country

USA

Zip

33137

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

11/19/2001

5. FEI Number

80-0023897

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
SMD	USKEVICH, CHRISTINE R.	600 NE 36TH ST., STE 1621	MIAMI, FL. 33137
P	SIRGADO, VICTOR A	600 NE 36TH ST., STE 1621	MIAMI, FL. 33137

400031707154

04/02/04--01017--002 **300.00

REINSTATEMENT 03-04

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

USKEVICH, CHRISTINE

7940 WEST DRIVE

21

NORTH BAY VILLAGE FL 33141

Name

USKEVICH, CHRISTINE R.

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

600 NE 36TH STREET

Suite, Apt. #, Etc.

STE. 1621

City

MIAMI,

State

FL

Zip Code

33137

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

Christine R. Uskevich
REGISTERED AGENT MUST SIGN

Date

11/19/03

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:

Christine R. Uskevich
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/19/03

Daytime Phone #

786-546-0288

Page 2 of 2

VICTOR SIRGADO INC.
600 NE 36TH STREET, SUITE 1621
MIAMI, FL 33137
(305) 573.9638

February 9, 2004

FL Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

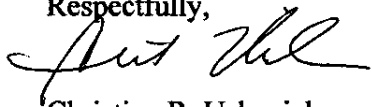
Attn: Justin M. Shivers (Ref#903A00065239)

It has just been brought to my attention that this paperwork was returned to our offices. It still stands that we did not receive the appropriate paperwork in time to file and make the original payment by the 2003 deadline.

Please accept this check and re-instate our corporation appropriately.

Thank you for your prompt attention to this matter. If you should have any questions or concerns, I am available to be reached at 305.573.9638 or 786.546.2888.

Respectfully,



Christine R. Uskevich
Managing Director/ Secretary
Victor Sirgado Inc.
#800023897