

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JAN 30 PM 3:14

DOCUMENT # PO 2000026164

1. Corporation Name

IKAROS CONSTRUCTION, INC.

600028658916
02/12/04--01035--027 **150.00

2. Principal Office Address

116 S. DUNCAN AVE

Suite, Apt. #, etc.

3. Mailing Office Address

Same

Suite, Apt. #, etc.

City & State

Clearwater, FL

Zip

33755

Country

USA

City & State

Zip

Country

REINSTATEMENT

D3-04

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

3/8/02

5. FEI Number

01-0621018

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

Peter Gemelas

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

116 S. DUNCAN AVE

Suite, Apt. #, Etc.

City

Clearwater

State

FL

Zip Code

33755

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 1/29/04

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
Pres.	Peter Gemelas	116 S. DUNCAN AVE	Clearwater, FL 33755
V. Pres.	MARY E GEMELAS	116 S. DUNCAN AVE	Clearwater, FL 33755
Sec.	Sam Goodman	260 Monterey Dr.	Naples, FL 34119

10. I certify that I am an officer or director of 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

Date

Daytime Phone #

1/29/04 2399483288

CR2E081 (10/02)

1/30/04

2/2

IKAROS CONSTRUCTION

116 S DUNCAN AVE
CLEARWATER, FL 33755
PHONE: 239-948-3288
FAX: 239-948-3286

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
CORPORATE FILINGS
REINSTATEMENTS

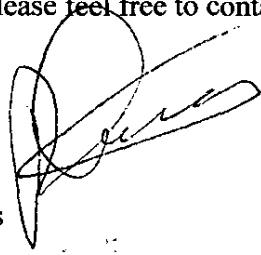
RE: DOC # PO2000026164

TO WHOM IT MAY CONCERN:

On May 5, 2003 you received our check in the amount of \$150.00. We forgot to add our Federal ID number and you sent it back to us, however, we never received the form. You seem to have an invalid address for our Corporation. Our address is 116 S Duncan Ave. Clearwater, FL 33755.

We are enclosing a reinstatement form and a check in the amount of \$150.00 for this year, 2004. Please feel free to contact us at the number above if you have any further questions.

Regards,



Peter Gemelas
President
Ikaros Construction, Inc.