## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

# **APPLICATION FOR** REINSTATEMENT



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State 3

DIVISION OF CORPORATIONS

#### **DOCUMENT #** P02000030685

1. Corporation Name

### CYNISCO, INCORPORATED

Principal Place of Business

Mailing Address

9008 MARLIN ST

9008 MARLIN ST

FILED

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SECRETARY OF STATE TALLAHASSEE. FLORIDA

	ntormation and ent	CAPE CANAVERAL FL 32920 CAPE CANAVERAL FL 32920			REINSTATEMENT D3		
	If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified			
2. 140W   Thirdipal Office Address, in Applicable		4.		To Do Business in Florida 03/20/2002			
Suite, Apt. #, etc. Suite, Apt. #,		etc.					
City & State City & State		and the same of th		01-0686493 Not Applicable			
Zip Country		intry	CERTIFICATE OF STATUS DESIRED   \$8.75 Additional Fee require for a Certificate of Status				
/or Director (Flo	rida nonprofit corp	orations must list at lea	st 3 directors)				
Title(s) Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip			
D BLACKWOOD, CYNTHIA		9008 MARLIN ST		CAPE CANAVERAL FL 32920			
			30 10/13/	00237506 0301064023	;83 **150.00		
		·					
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent				
•		Name					
GORDON, JASON M — 103 N ATLANTIC AVE COCOA BEACH FL 32931		Street Address (P.O. Box Number is Not Acceptable)					
		Suite, Apt. #, Etc.					
	·	City		State FL			
ove named corp	oration, am familia	r with and accept the ol	bligations of Secti	on 607.0505, F.S. or 617.056	05, F.S.		
EGISTERED AC	GENT MUST SIGN	· · · · · · · · · · · · · · · · · · ·		Date 10/9/0	3		
	3. New Mail Suite, Apt. #, City & State Zip  I/or Director (Flo	3. New Mailing Office Address Suite, Apt. #, etc.  City & State  Zip Coulor Director (Florida nonprofit corp 3 9008 MARLIN  t Registered Agent	3. New Mailing Office Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip Country  Nor Director (Florida nonprofit corporations must list at lease Street Address of Each Officer and/or Director 9008 MARLIN ST  **Registered Agent**  Name  Street Address (Florida nonprofit corporations must list at lease Street Address (Florida nonprofit corporations must list at lease Street Address (Florida nonprofit corporations must list at lease Notice and Notice and Notice nonprofit corporations must list at lease Street Address (Florida nonprofit corporations must list at lease Notice and Notice nonprofit corporations must list at lease Street Address (Florida nonprofit corporations must list at lease Notice and Notice nonprofit corporations must list at lease Notice nonprofit nonprofi	3. New Mailing Office Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip  Country  Country  Street Address of Each Officer and/or Director  9008 MARLIN ST  Registered Agent  Name  Street Address (P.O. Box Number Suite, Apt. #, Etc.  City  Suite, Apt. #, Etc.  City  Suite, Apt. #, Etc.  City  Suite, Apt. #, Etc.	3. New Mailing Office Address, if Applicable  Suite, Apt. #, etc.  City & State  Zip  Country  Country		

11.1 certify that I arry 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.

103 N. Atlantic Ave. • Cocoa Beach, Florida 32931 Phone 321.799.4777 • Fax 321.799.4759

Jason M Gordon \*
\*Admitted in FL, NY & CT
Robin M. L. Cornell

Maureen Langlois Paralegal Patricia Harmon Office Manager

October 9, 2003

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

In Re: Cynisco, Inc., Document Number P02000030685

To Whom It May Concern:

My client, Cynisco, Inc., recently received notification from your office that their corporation had been administratively dissolved for failure to file 2003 UBR. My client's address is the principal place of business, and they never received the UBR form for 2003, nor did they receive prior notification from the State that they were in jeopardy of dissolution.

As the Registered Agent for this corporation, I am requesting that the reinstatement fee be waived, and that submission of the enclosed reinstatement form and \$150.00 filing fee for 2003 serve to revoke administrative dissolution, and place this corporation back into active status.

Please contact my office if you have any questions regarding this request, or if you require further information.

Thank you for your consideration in this matter.

Jason M Gordon

Sincerely,

Attorney at Law

JMG/psh Enclosures

Cc: Cynthia Blackwood, Director of Cynisco, Inc.