

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # R0200096261

1. Corporation Name

SALON DE CORDOVA, INC.

2. Principal Office Address

4224 BRIANBERRY LANE

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33624

Country

HILLSBOROUGH

3. Mailing Office Address

SAME AS #2

Suite, Apt. #, etc.

City & State

Zip

Country

FILED
2003 04 AUG 18 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800040431808
08/23/04--01077--002 **150.00

800040431808
08/23/04--01077--001 **150.00

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

5. FEI Number

55-0796922

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

DE CORDOVA, BEN J

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

4224 BRIANBERRY LANE

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33624

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

Date

REGISTERED AGENT MUST SIGN

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 D	DECORDOVA, BEN J	4224 BRIANBERRY LANE	TAMPA, FL 33624
VP D	DECORDOVA, ZONdra	4224 BRIANBERRY LANE	TAMPA, FL 33624

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/16/04

Date

813-870-0084

Daytime Phone #

CR2E081 (01/04)

JOHN T. WEAVER, CPA, P.A.

Certified Public Accountant

3601 SWANN AVE, STE 207

TAMPA, FLORIDA 33609

Telephone: 813-870-0084 * Cell Phone 813-486-2565 *** Fax 813-350-0288**

August 18, 2004

Mr. Tyrone Scott
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: **Reinstatement**
Salon De Cordova, Inc.
Document Number: L02000096261

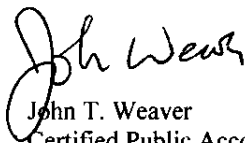
Dear Tyrone:

Please help me get this corporation reinstated. I learned from you that the Secretary of State would consider reinstatement if the forms were never received. They never were because the corporate officer moved to a new location.

The reason this corporation did not file the annual report was that they did not receive the UBR in the mail. The officer was unaware of this until I looked it on "sunbiz.org". Please accept our \$ 150.00 check for the 2003 UBR and our check for \$ 150.00 for the 2004 UBR. I believe that not getting the UBR or any notices in the mail would be considered as reasonable cause to reinstate the corporation without penalty.

Thank you for your assistance in this matter. I appreciate your fine work. I believe the Bucs are going to the Super Bowl again this year. If you need additional information or I can answer any questions for you, please call me at 813-870-0084.

Sincerely,



John T. Weaver
Certified Public Accountant