

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000105083

Entity Name: K.O.F. OF TAMPA, INC.

**FILED**  
**Nov 25, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

615 SAVANNAH OAKS DR  
BROOKSVILLE, FL 34602

**New Principal Place of Business:**

202 ZOLLER ST  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

615 SAVANNAH OAKS DR  
BROOKSVILLE, FL 34602

**New Mailing Address:**

7428 PO BOX  
WESLEY CHAPEL, FL 33544

FEI Number: 02-0646069

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FARKAS, KRISZTIAN  
29818 PRAIRIE FALCON DR  
WESLEY CHAPEL, FL 33545 US

**Name and Address of New Registered Agent:**

KRIS, FARKAS  
202 ZOLLER ST  
BROOKSVILLE, FL 34601 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KRIS FARKAS

11/25/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KOF OF TAMPA INC  
Address: 202 ZOLLER ST  
City-St-Zip: BROOKSVILLE, FL 34601

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KRIS FARKAS

P

11/25/2014

Electronic Signature of Signing Officer or Director

Date