

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
05 DEC 30 AM 9:20

RECEIVED  
DATE

CR2E081 (8/05)

DOCUMENT # P02000113798

**1. Corporation Name**

FASHION ALTERATIONS, INC.

**2. Principal Office Address**

8045 W. MCNAB ROAD

Suite, Apt. #, etc.

**City & State**

TAMARAC, FL

Zip  
33321

Country  
USA

**3. Mailing Office Address**

8045 W. MCNAB ROAD

Suite, Apt. #, etc.

**City & State**

TAMARAC, FL

Zip  
33321

Country  
USA

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

10/21/02

**5. FEI Number**

22-3877980

**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

AZADOUHIE VARTANIAN

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

1050 NW 13 ST

Suite, Apt. #, Etc.

183D

City

BOCA RATON

State  
FL

Zip Code  
33486

000062482490

12/30/05--01004--005 \*\*300.00

**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

12-24-05

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip   |
|--------|--------------------------------------|---|----------------------|
| P      | AZADOUHIE VARTANIAN                  | 1050 NW 13 ST, 183D                               | BOCA RATON, FL 33486 |
| D      | GARABET VARTANIAN                    | 1050 NW 13 ST, 183D                               | BOCA RATON, FL 33486 |
|        |                                      |   |                      |
|        |                                      |   |                      |
|        |                                      |   |                      |
|        |                                      |   |                      |

**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:**

*A. Vartanian*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-24-05 954/720-050

Daytime Phone #

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December 19, 2005

Fashion Alterations, Inc.  
8045 W. McNab Road  
Boca Raton, FL 33321

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Document # P02000113798

To Whom It May Concern:

Please reinstate the corporation noted above. Enclosed you will find a check for \$300 which represents the annual fees for 2004 and 2005.

We did not receive the 2004 renewal request and thus were not aware of the renewal requirement. Furthermore, I was not aware of the requirement to file an annual report because this is my first time as a business owner and did not know of the filing requirement. I respectfully request that you waive any late fees and penalties.

Should you have any questions please call me at 954-907-1630.

Sincerely,



Azadouhie Vartanian