

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P02000119766			
1. Corporation Name PINE POINT NORTH CORP.			
2. Principal Office Address c/o Mary B. Livadas 19810 Queenswood Drive Suite, Apt. #, etc.		3. Mailing Office Address c/o Anthony Vasilas 80 Gristmill Lane Suite, Apt. #, etc.	
City & State Jupiter, FL		City & State Manhasset, NY	
Zip 33458	Country USA	Zip 11030	Country USA
4. Date Incorporated or Qualified To Do Business in Florida		11/06/2002	
5. FEI Number		☒ Applied For ☐ Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☐		To 75. Authority of the corporation for a court in this state.	
7. Name and Address of Current Registered Agent			
Name Mary B. Livadas			
Street Address (P.O. Box Number is Not Acceptable) 19810 Queenswood Drive			
Suite, Apt. #, Etc.			
City Jupiter		State FL	Zip Code 33458-1841
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 <i>Mary B. Livadas</i>		Date <i>9/22/05</i>	
REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/T/D	Anthony Vasilas	80 Gristmill Lane	Manhasset, NY 11030
VP/S/D	Nicholas G. Pappas	33-20 Broadway	Long Island City, NY 11106
D	Sophie Vasilas	80 Gristmill Lane	Manhasset, NY 11030
D	Elpis Chandras	3 Beechtree Lane	Manhasset, NY 11030
D	Mary B. Livadas	19810 Queenswood Drive	Jupiter, FL 33458
SEE ATTACHED RIDER 9			
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: <i>Anthony Vasilas</i>		Date <i>9/23/05</i>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

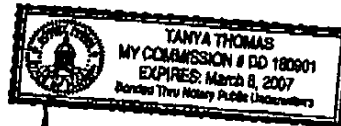
CURE201 (05/05)

PINE POINT NORTH CORP.

RIDER 9 TO CORPORATON REINSTATEMENT

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City/State/Zip
D	Demetrios C. Pappas	33-20 Broadway	Long Island City, NY 11106
D	Raffaeta Bartone	420 Ocean Terrace	Staten Island, NY 10301

11/27/05



Tanya Thomas
Notary

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

PINE POINT NORTH CORP.

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