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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		3. Mailing Office Address	
c/o Mary B. Livadas 19810 Queenswood Drive		c/o Anthony Vasilas 80 Gristmill Lane	
Suite, Apt. #, etc.		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: X Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name
Mary B. Livadas

Street Address (P.O. Box Number is Not Acceptable)
19810 Queenswood Drive

REINSTATEMENT 09-05

Suite, Apt. #, Etc.

City	State	Zip Code
Jupiter	FL	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: Mary B. Livadas — Date: 9/22/05
REGISTERED AGENT MUST SIGN

CR2E081 (06/05)

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/T/D	Anthony Vasilas	80 Gristmill Lane	Manhasset, NY 11030
VP/S/D	Nicholas C. 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: Anthony Vasilas, President — 9/23/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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	Raffaela Bartone	420 Ocean Terrace	Staten Island, NY 10301

Mar 05

TANYA THOMAS
MY COMMISSION # DD 180901
EXPIRES: March 8, 2007
Bonded Thru Notary Public Underwriters

Tanya Thomas
Notary

Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
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From:
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Account Number : I20000000195
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CORPORATION REINSTATEMENT

PINE POINT NORTH CORP.

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