

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2007 MAY -1 PM 5:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

Ref: P03000049130  
DOCUMENT #  
1. Corporation Name THE VIBAR GROUP, INC.

**REINSTATEMENT** 06-07

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #  
201 Bridgwood Ct.  
Suite, Apt. #, etc.

3. Mailing Office Address  
7004 Woodbridge Circle  
Suite, Apt. #, etc.

City & State  
Boca Raton, FL

City & State  
Boca Raton, FL

Zip  
33434  
Country  
USA

Zip  
33434  
Country  
U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida 2004

5. FEI Number 020691771  
~~Reasoned~~  
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  
BARBARA SNEIDER  
Street Address (P.O. Box Number is Not Acceptable)  
7004 Woodbridge Circle  
Suite, Apt. #, Etc.  
City  
Boca Raton  
State  
FL  
Zip Code  
33434

☒ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

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 Barbara Snider

Date 4/11/07

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<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip            |
|--------|--------------------------------------|---|-------------------------------|
| ST     | VIVIAN ALLEN                         | 201 Bridgwood Ct.                                 | Boca Raton, FL 33434          |
| P      | BARBARA SNEIDER                      | 7004 Woodbridge Circle                            | Boca Raton, FL 33434          |
|        |                                      |   | 600109237506                  |
|        |                                      |   | 05/25/07--01008--022 **300.00 |
|        |                                      |   |                               |
|        |                                      |   |                               |
|        |                                      |   |                               |

10. I certify that I am an officer or director of 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 contained in Chapter 119, 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: Vivian S. Allen  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 9, 07 561-482-7242  
Date Daytime Phone #

5/9/07