

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

06 MAR -6 PM 1:33

SECRET  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P04000056371**

1. Corporation Name

**VORGO ENTERPRISES, INC**

600068109196  
03/20/06--01023--028 \*\*150.00  
600068109196  
03/20/06--01023--027 \*\*150.00

2. Principal Office Address

**12706 PARKBURY DR**

3. Mailing Office Address

**SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**ORLANDO, FL 32822**

City & State

**SAME**

Zip

**FL**

Country

**ORANGE**

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

**20-0946721**

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

**JOHN TORO**

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

**7431 MOLOKAI ST**

Suite, Apt. #, Etc.

City

**ORLANDO**

State

**FL**

Zip Code

**32822**

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

**John A. Toro**

REGISTERED AGENT MUST SIGN

Date

**02/28/06**

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
<b>P/D</b>	<b>JOHN TORO</b>	<b>7431 MOLOKAI ST.</b>	<b>ORLANDO FL 32822</b>
<b>V/P/D</b>	<b>JORGE TORO</b>	<b>12706 PARKBURY DR</b>	<b>ORLANDO FL 32828</b>

**K. Eckel MAR 08 2006**

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 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:

**John A. Toro**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

**02/28/06 407-237-1025**

Daytime Phone #

2/2

JORGO ENTERPRISES, INC  
12706 PARKBURY DR  
ORLANDO, FL 32828  
407-227-1020

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

GENTLEMEN:

SUBJECT : ADMINISTRATIVE DISSOLUTION FOR ANNUAL REPORT  
OF JORGO ENTERPRISES, INC., P04000056371 WITH FEI NO 20-0946721

ACCORDING TO THE INSTRUCTIONS THAT WE RECEIVED FROM YOUR  
TELEPHONE DIRECTORY WE ARE FILING A CORPORATE REINSTATEMENT  
SINCE OUR REFERENCED CORPORATION WAS ADMINISTRATIVELY  
RESOLVED DUE TO NON-PAYMENT OF THE ANNUAL REPORT.

SINCE WE DID NOT RECEIVED YOUR ANNUAL REPORT NOTICE, WE  
WERE NOT AWARE OF THIS DEADLINE. PLEASE, NOTICE OUR NEW  
ADDRESS . WE LEARNED ABOUT OUR ADMINISTRATIVE DISSOLUTION  
WHEN WE WERE LOOKING IN YOUR WEB PAGE FOR OUR NAME.

WE ARE REQUESTING THE ABATEMENT OF THE REINSTATEMENT FEES  
AND WE ARE ENCLOSING OUR CHECK FOR \$150.00 FOR CALENDAR YEAR  
CALENDAR YEAR 2004 THAT IS PAYABLE IN OR PRIOR TO MAY 1<sup>ST</sup> 2005  
ADDITIONALLY WE ARE ENCLOSING ANOTHER CHECK FOR \$150.00  
TO PAY FOR CALENDAR YEAR 2005 THAT IS DUE ON OR BEFORE  
MAY 1, 2006.

WE SHALL APPRECIATE REINSTATEMENT OF OUR CORPORATION  
AS SOON AS POSSIBLE.

YOURS VERY TRULY,

PRESIDENT

