

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000073126

1. Entity Name
SVETIK INVESTMENTS, INC



Principal Place of Business
2999 NE 191 STREET
400
AVENTURA, FL 33180

Mailing Address
2999 NE 191 STREET
400
AVENTURA, FL 33180

FILED
05 NOV 17 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



11102005 REIN-P CR2E098 (6/04)

4. FEI Number **11-3718379** Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SORSHER, ALEX
2500-1 N STATE ROAD 7
HOLLYWOOD, FL 33021

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2006, Fee will be \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **KOZLOVSKAIA, SVETLANA**
STREET ADDRESS **2999 NE 191 STREET STE 400**
CITY-ST-ZIP **AVENTURA, FL 33180**

TITLE **VP** ☐ Delete
NAME **ROMANOSKAYA, ELENA**
STREET ADDRESS **2999 NE 191 STREET STE 400**
CITY-ST-ZIP **AVENTURA, FL 33180**

TITLE **VP** ☐ Delete
NAME **AYDOGDU, RITA**
STREET ADDRESS **2999 NE 191 STREET STE 400**
CITY-ST-ZIP **AVENTURA, FL 33180**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Svetlana Kozlovskaya*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/10/05 (561) 414-6308
Date Daytime Phone #

SVETLANA KOZLOVSKAIA, PRES

NOV 15 2005

HARK & ASSOCIATES, P.A.
ATTORNEYS AT LAW

2650 N. MILITARY TRAIL, SUITE 220
BOCA RATON, FLORIDA 33431
e-mail: Laura@harklegal.com

CLIFFORD B. HARK
LAURA BOURNE BURKHALTER
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Palm Beach: (561) 989-0022
Facsimile: (561) 989-9697

November 1, 2005

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

Re: Svetik Investments, Inc.
Document No. P04000073126
Reinstatement of Corporation

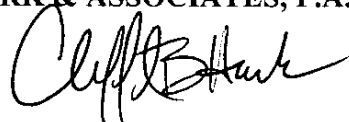
Dear Division of Corporation Representative:

I am pleased to enclose the reinstatement form signed by my Client, along with my firm's Trust Account check in the amount of \$150.00, which pays for the filing fees to reinstate this corporation.

Thank you in advance for your prompt attention to this matter. I remain,

Very truly yours,

HARK & ASSOCIATES, P.A.



Clifford B. Hark, Esquire
For the Firm

CBH/ms
Enclosures

Cc: Svetlana Kozlovskaja