

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 MAR 17 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P06000112703

1. Corporation Name

VISION GLOBAL GROUP CORPORATION

2. Principal Office Address - No P.O. Box #
9526-B2 ARGYLE FORREST BLVD

3. Mailing Office Address
9526-B2 ARGYLE FORREST BLVD

Suite, Apt. #, etc.
SUITE 410

Suite, Apt. #, etc.
SUITE 410

City & State
JACKSONVILLE, FL.

City & State
JACKSONVILLE, FL.

Zip Country
32222 DUVAL

Zip Country
32222 DUVAL

REINSTATEMENT 07-08
CR20081 (1/07)

4. Date Incorporated or Qualified
To Do Business in Florida 08/29/2006

5. FEI Number
21-5404604

☒ 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
MICHAEL L. CEASER

Street Address (P.O. Box Number is Not Acceptable)
9951 ATLANTIC BLVD

Suite, Apt. #, etc.
SUITE 313

City State Zip Code
JACKSONVILLE, FL 32225

☒ 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

[Signature]
REGISTERED AGENT MUST SIGN

Date 02/15/2008

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 | KIEARA A. MORAVIA | 575 OAKLEAF PLANTATION PKWY 616 | ORANGE PARK, FL. 32065 |
| V | JOSEPH J. MORAVIA | 575 OAKLEAF PLANTATION PKWY 616 | ORANGE PARK, FL. 32065 |
| | <i>[Signature]</i> | | |
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400121244714
03/25/08--01050--008 **291.25

400121244714
03/25/08--01050--009 **8.75

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: *Kieara Moravia*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/08
Date

9046374715
Daytime Phone #