PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPOR REINSTAT	2000年 1000日	•	TMENT OF STATE y of State orporations		2008 OCT 16 AM 10: 34
DOCUMENT # P06000129258 1. Corporation Name David Andreychuk Public Relations, Inc.				g.	
				10718	10136980523 70801032020 **900.00
']	3. Mailing Office Address 18130 Longwater Run Drive		INSTATEMENT
		Suite, Apt. #, etc. N/A			orated or Qualified
City & State Tampa, Florida		City & State Tampa, Florida		5. FEI Number	Applied For Not Applicable
33647	Country	33647	Country	6. CERTIFICATE	OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
Name David Andreychuk Street Address (P.O. Box Number is Not Acceptable) 18130 Longwater Run Drive Suite, Apt. #, Etc. N/A City Tampa 7. Name and Address of Current Registered Agent Surrent Registered Agent Zip Code 33647				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 Signature of Registered Agent REGISTERED AGENT MUST SIGN					Date 10/1/05/8
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 for Directors		Street Address of Each Officer and/or Director		City / State / Zip
P And	Andreychuk, David		18130 Longwater Run Drive		Tampa, Florida 33647
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: JULY H David And reychit 10/1/08 813 907-5653 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #					



ATTORNEYS AT LAW • SINCE 1948

WINTER HAVEN (863) 294-3360 FAX (863) 299-5498 P.O. BOX 24628 LAKELAND, FLORIDA 33802-4628

LAKE WALES (863) 676-7611 OR (863) 683-8942 FAX (863) 676-0643

HERITAGE PLAZA
225 EAST LEMON STREET, SUITE 300
LAKELAND, FLORIDA 33801
(863) 683-6511 OR (863) 676-6934
FAX (863) 682-8031

www.PetersonMyers.com

October 13, 2008

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re:

David Andreychuk Public Relations, Inc.

Dear Sir or Madam:

Enclosed please find a Corporation Reinstatement form for filing regarding the above-referenced entity. Also enclosed is a check in the amount of \$900.00 for the reinstatement fee.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

₹van W. Zika

RWZ/mes Enclosures



