* PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		,	TMENT OF STAT y of State orporations		FILED 04 SEP PT AM II: 09	,	
DOCUMENT # P93000040801 1. Corporation Name HARPO'S OF YBOR CITY, INC.				İ	SECRETARY OF STATE FALLAHASSEF, FLORIDA		
	AST 7TH AVENUE ARINER ST						
2. Principal Office Address 1805 EAST 7TH AVENUE		3. Mailing Office Address 5805 MARINER ST					
Suite, Apt. #	f, etc.	Suite, Apt. #, etc.			corated or Qualified	· .	
City & State TAMPA, FLORIDA		City & State TAMPA, FLORIDA		5. FEI Numbe	To Do Business in Florida 06/03/1993 5. FEI Number		
Zip Country 33602 USA		Zip 33609	Country USA	6.	SOF STATUS DESIRED STATUS DESIRED for a Certificate		
	7. Name and Address of Current Registered Agent						
	Name JEFFREY HATJIOANNOU 500041294205 09/23/0401055007 **300 00						
	Street Address (P.O. Box Number is Not Acceptable) 5805 MARINER ST				╟╘╬╬┈╶┧╟╏┈┈╘╒ ╟┇	. 00	
	Suite, Apt. #, Etc.					•	
	City TAMPA			-	State Zip Code 33609		
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 REGISTERED AGENT MUST SIGN							
Signature of Registered Agent Page 9-8-04 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 Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip		
PRESII	JEFFREY HATJIOANNOU		5805 MARINER ST		TAMPA, FL 33609	()	
TREAS	CAROL HATJIOANNOU	383	2 SWANS	LANDING	LAND O LAKES, FL	24639	
	03-04						
				OFF. AT THE			
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 filling 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 under section 119.07(3)(i), 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR Date							

Harpo's of Ybor City, Inc 5805 Mariner Street Tampa, Florida 33609

September 8, 2004

Ms. Louise Jackson
Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Re: Corporation Annual Reports

Dear Ms. Jackson:

As per your instructions, this letter explains the reason we had not paid our annual fees for 2003 and 2004.

In 2002, Mr. Campillo, one of the shareholders, sold his portion of the business to me, Jeffrey Hatjioannou. Apparently, according to you, the previous registered agent formally resigned that responsibility and you then sent a letter warning that we needed to identify another to be our registered agent. The letter was mailed to the post office box you had on record as our corporate mailing address. This post office box belongs to Mr. Campillo who failed to forward the letter to me. Mr. Campillo had always handled the bills, licenses and filing requirements when he was a shareholder, and I was not aware of the events which had transpired resulting in an administrative dissolution of our corporation.

Enclosed is a check for \$300.00 to pay for the 2003 and 2004 filings and an annual report with the current information as to the shareholders, registered agent and respective mailing addresses.

Due to the extenuating circumstances as explained above, please wave the penalties for non-compliance.

If you need any further information, please contact me.

Yours truly,

Jeffrey Hatj)oannou

/gs

encl.