

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #93000065527

1. Corporation Name

J. Vasiliadis, Inc.

2. Principal Office Address - No P.O. Box #
4403 W. Gandy Blvd

Suite, Apt. #, etc.

City & State
Tampa, Florida

Zip
33611

Country
US

3. Mailing Office Address
1474 Country Oaks Lane

Suite, Apt. #, etc.

City & State
Clearwater, FL 33764

Zip
33764

Country
US

7. Name and Address of Current Registered Agent

Name
George G Pappas PA

Street Address (P.O. Box Number is Not Acceptable)
1822 North Belcher Road

Suite, Apt. #, Etc.
200

City
Clearwater

State
FL

Zip Code
33765

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

George G Pappas

REGISTERED AGENT MUST SIGN

Date **September 12, 2007**

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	John Vasiliadis	1474 Country Oaks Lane	Clearwater, FL 33764

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 Vasiliadis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

September 12, 2007 727-432-9569

Date

Daytime Phone #

FILED

2007 SEP 18 PM 3:59

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT

CR2E081 (1/07)

61-07

4. Date Incorporated or Qualified
To Do Business in Florida **9-15-1993**

5. FEI Number
593208517

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

☐ 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.

SEP 18 2007

September 14, 2007

Division of Corporations
Tallahassee, Florida

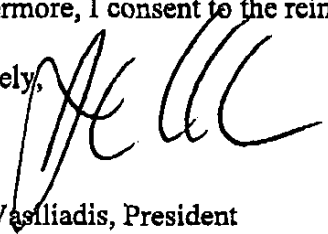
RE: J Vasiliadis, Inc.
P05000091033

Dear Sir or Madam:

On behalf of J Vasiliadis, Inc., I hereby confirm that I will not revoke the dissolution of J Vasiliadis, Inc.

Furthermore, I consent to the reinstatement and use of J.Vasiliadis, Inc. by this entity.

Sincerely,



John Vasiliadis, President
J Vasiliadis, Inc.