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CSC

P.003

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

97 AUG 15 AM 11:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000001622

1. Corporation Name:

NEREUS AUDIO INTERNATIONAL, INC.

Principal Place of Business

4710 Eisenhower Boulevard
Suite C-8
Tampa, FL 33634

Mailing Address

SAME

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

4531 Rosemere

Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable

4531 Rosemere

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33609

Country

Zip

33609

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/06/1994

5. FEI Number

59-3221913

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DPCE	McDonald, Brian A.	4710 Eisenhower Boulevard Suite C-8	Tampa, FL
VP&S	Kadow, Joseph J.	550 N. Reo Street, Ste. 200	Tampa, FL 33609

500002268295--4

8. Name and Address of Current Registered Agent

Kadow, Joseph J.
550 North Reo St.
Suite 200
Tampa, FL 33609

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0606, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐(See other side for information
on intangible tax.)

12. 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 under section 119.07(3)(b), 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 OFFICER OR DIRECTOR

Joseph J. Kadow, Vice President

08/14/97

Date

(813) 282-1225

Daytime Phone

CS-5040 (12-95)



THE UNITED STATES
CORPORATION
COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 495391 84041A

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ 923.75

ORDER DATE : August 13, 1997

ORDER TIME : 10:50 AM

ORDER NO. : 495391-010

CUSTOMER NO: 84041A

CUSTOMER: Ms. Norma Deguenther
Outback Steakhouse Of Florida,
Suite 200
550 North Reo Street
Tampa, FL 33609

DOMESTIC FILINGS

NAME: NEREUS AUDIO INTERNATIONAL,
INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder

EXAMINER'S INITIALS _____

RECEIVED
97 AUG 15 AM 11:25
DIVISION OF CORPORATION

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