## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **APPLICATION** FOR... REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P94000063113 DOCUMENT #

1. Corporation Name

THE TAURUS CONNECTION, INC.

Principal Place of Business

Mailing Address

5630 YAHL ST NAPLES FL 34109

9320 VANDERBILT DRIVE NAPLES FL 34108

If above addres	ses are incorrect in any way, line	through incorrect informa	ation and enter correction below	w.
New Principal Office Address, If Applicable		3. New Mailing Of	3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State		City & State	City & State	
Zip	Country	Zip	Country	
	<del></del>	<del></del>		==

FILED

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TALLAHASSEE, FLORIDA

REMSTATEMEN	7 03
Date Incorporated or Qualified To Do Business in Florida 08/26	6/1994
. FEI Number	Applied For

00 00 10000	Not Applicable
6. CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	PETERSEN, MAUREEN R	9320 VANDERBILT DRIVE	NAPLES FL 33963
D	PETERSEN, ROBERT A	9320 VANDERBILT DR	NAPLES FL
TS	RACHEL, DANIELLE P	828 104TH AVE N	NAPLES FL 34108
_			800023966488
			10/21/0301050004 **150.00
		10.0/23	
8. Name and Address of Current Registered Agent  PETERSEN RACHEL, DANIELLE  5630 YAHL STREET  NAPLES FL 34109		tered Agent 9.	Name and Address of New Registered Agent
		Street Address (P.O. Suite, Apt. #, Etc.	Street Address (P.O. Box Number is Not Acceptable)
		City	State   Zin Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

REGISTERED AGENT MUST SIGN

11. 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)(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 OFFICER OR DIRECTOR



10/15/03

To whom it may concern,

Enclosed is a check for \$150, the original amount due. I am contesting the late fees assigned to my corporation The Taurus Connection Inc FEI #65-0515568. The application for reinstatement was the first and only correspondence I have received. I am well aware of the need for this paperwork to be paid on time and had I received anything prior to this notice I would have done just that, therefore I am asking that the late fees be waived and that my corporation be reinstated as soon as possible.

Thank you in advance for your prompt and kind attention to this matter.

Kindest Regards,

Danielle P Rachel

it is how you was

Marie ...