

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortimer
Secretary of State

DIVISION OF CORPORATIONS

FILED

97 MAY 30 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDADOCUMENT # P94000089645

1 Corporation Name

GERMAN NEWS ARTS & GRAPHICS, INC.

Principal Place of Business

Mailing Address

8649 North Himes Avenue
Apt. 1312
Tampa, Florida 33614REINSTATEMENT 95-97

DO NOT WRITE IN THIS SPACE

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

2 Principal Office Address, If Applicable

New Mailing Address, If Applicable

1413 S. Howard Avenue

4 Date Incorporated or Qualified
To Do Business in Florida
December 12, 1994

Suite 105

Suite, Apt. #, etc.

5 FEI Number
59-3282124

App. Fee For

Not Applicable

City, State
Tampa, Florida

City & State

Zip
33606Country
USA

Zip

Country

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

7 Officers and Shareholders of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City/State/Zip
P	Ingrid Oshiro-Weingartner	1413 S. Howard #105	Tampa, FL 33606
VP	Frank R. Ladd	1413 S. Howard #105	Tampa, FL 33606
S	Alfred Weingartner	1413 S. Howard #105	Tampa, FL 33606

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-06/09/97--01149--027
***1088.75 ***1088.75

JB 6-4-97

8 Name and Address of Current Registered Agent

9 Name and Address of New Registered Agent

Gordon L. Kiester, P.A.
115 N. MacDill Avenue
Tampa, Florida 33609

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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.

Signature of
Registered Agent

Date

5/22/97

REGISTERED AGENT MUST SIGN

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.0713(k), Florida Statutes. I further certify that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to prepare 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., and that all fees owed by the corporation have been paid. 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

May 22/97

President