

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

13 JUL 23 AM 11:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000047967

1. Corporation Name

Heritage Investments of Sarasota, Inc.

2. Principal Office Address - No P.O. Box #

8954 Phyliss Avenue

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Zip

34231

Country

USA

Zip

Country

CR2E081 (11/10)

4. Date Incorporated or Qualified  
To Do Business in Florida

June 20, 1995

5. FEI Number

65-0605063

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED  
Yes

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Nicholas P. Sardelis, Jr.

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

2033 Main Street

Suite, Apt. #, Etc.

502

City

Sarasota

State

FL

Zip Code

34231

300250046659  
07/23/13--01034--007 \*\*1350.75

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

Date July 15, 2013

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
P, S, T	Mounir Consul	8954 Phyliss Avenue	Sarasota, FL 34231
	JUL 25 2013	REINSTATEMENT	09-13
	T. SCOTT		

10. E-mail Address: consulmounir@gmail.com

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.155, F.S.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/15/2013 941 374-3318  
Date Daytime Phone #

mgc wh

# SARDELIS AND BOWLES, L.L.P.

ATTORNEYS AT LAW

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

CATHERINE B. BOWLES, P.A.  
BOARD CERTIFIED CIVIL TRIAL LAWYER  
PERSONAL INJURY REPRESENTATION  
WRONGFUL DEATH ACTIONS  
CIVIL LITIGATION

2033 MAIN STREET, SUITE 502  
SARASOTA, FLORIDA 34237-6063  
TELEPHONE (941) 366-1200  
FAX (941) 365-6691

NICHOLAS P. SARDELIS, JR., CHARTERED  
DIVORCE LITIGATION  
FAMILY LAW  
COMMERCIAL LITIGATION  
CRIMINAL DEFENSE

July 16, 2013

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Corporation Reinstatement - Heritage Investments of Sarasota, Inc.

Dear Sir or Madam,

Enclosed herewith is a corporation reinstatement form in connection with that certain entity known as "*Heritage Investments of Sarasota, Inc.*"

Also enclosed herewith is our check in the amount of \$1,350.75 which represents payment of the reinstatement fee and annual report fees for the calendar years of 2009, 2010, 2011, 2012, and 2013, along with a fee for a certificate of status.

Please forward the certificate of status together with any other documentation which reflects that the above corporation has been reinstated to the undersigned.

Thanking you for your prompt attention to this matter, I remain,

Sincerely,



Nicholas P. Sardelis, Jr.

NPS/dcs

Enc. (2)

1. Corporation Reinstatement form
2. Check No. 6313 in the amount of \$1,350.75