

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 04 MAY 18 PM 8:12 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # <u>P96000097254</u>					
1. Corporation Name <u>Cosmos Communications of Sarasota, Inc</u>					
2. Principal Office Address <u>4604 Swordfish Dr.</u> Suite, Apt. #, etc.		3. Mailing Office Address <u>SAA</u> Suite, Apt. #, etc.			
City & State <u>Bradenton FL</u>		City & State		4. Date Incorporated or Qualified To Do Business in Florida	
Zip <u>34208</u>	Country <u>manatee</u>	Zip	Country	5. FEI Number <u>651107420</u>	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐				\$8.75 Additional fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name <u>Michael Stanton</u> <u>500035259665</u>					
Street Address (P.O. Box Number is Not Acceptable) <u>4604 Swordfish Dr.</u> <u>85/03/04-01052-025</u> <u>\$300.00</u>					
Suite, Apt. #, Etc. <u>Bradenton FL 34208</u>					
City <u>Bradenton</u>				State FL	Zip Code <u>34208</u>
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 <u>Michael Stanton</u>		Date <u>4-28-04</u>			
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
<u>President</u>	<u>Michael Stanton</u>	<u>4604 Swordfish Dr.</u>		<u>Bradenton FL 34208</u>	
<u>Owner</u>					
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 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: <u>Michael Stanton</u>		Date <u>4-28-04</u>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # <u>941-747-1003</u>			

C-2001 101-00

COSMOS COMMUNICATIONS
OF SARASOTA, INC.



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Cosmos Communications of Sarasota, Inc.
4604 Swordfish Dr.
Bradenton, FL 34208

April 29, 2004

To whom it may concern,

I would like to request a waiver as our company moved and we never received a card or letter for corporate registration. We are sending 150.00 for 2003 and 2004. Please let us know if this is possible.

Respectfully,

Michael Stanton

Michael Stanton

President

Cosmos Communications

Mstanton@cosmos-communications.com

Main: (941)-379-3559

Cell: (941)-704-4639