

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

09 DEC 17 AM 10: 25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000026027

1. Corporation Name

VRJ Enterprises, Inc.

400163725714  
12/17/09--01037--011 \*\*300.00

REINSTATEMENT 08-09  
CR2E081 (1/1/09)

2. Principal Office Address - No P.O. Box # 5463 Grand Blvd. Suite, Apt. #, etc.		3. Mailing Office Address 6105 Main Street Suite, Apt. #, etc.	
City & State New Port Richey, FL		City & State New Port Richey, FL	
Zip 34652	Country	Zip 34653	Country

4. Date Incorporated or Qualified To Do Business in Florida 03/24/1997	
5. FEI Number 59-3492941	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent			
Name Vishnu G. Patel			
Street Address (P.O. Box Number is Not Acceptable) 5463 Grand Blvd.			
Suite, Apt. #, Etc.			
City New Port Richey		State FL	Zip Code 34652

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

*Vishnu G. Patel*

REGISTERED AGENT MUST SIGN

Date 11/24/09

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
PD	Vishnu G. Patel	5463 Grand Blvd.	New Port Richey, FL 34652
VD	Jayanti B. Patel	14816 Dartmoor Lane	Tampa, FL 33624
	<i>12/18</i>		

10. E-mail Address: david@davidadorsey.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., 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

SIGNATURE:

*Vishnu G. Patel*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/24/09

Daytime Phone #