

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 MAY 17 PM 2:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P98000033598**

**1. Corporation Name**

EXODUS ENTERPRISES CORP

1051 East Sample Rd  
Same

**2. Principal Office Address**

1051 East Sample Rd

**3. Mailing Office Address**

Same

Suite, Apt. #, etc.

Suite F-

Suite, Apt. #, etc.

Same

City & State

Pompano Beach, FL

City & State

Same

Zip

33064

Country

Broward

Zip

33064

Country

Broward

**4. Date Incorporated or Qualified**

To Do Business in Florida 04/10/98

**5. FEI Number**

65-0823873

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**REINSTATEMENT 03-04**

**7. Name and Address of Current Registered Agent**

Name

CAROLINA VERDOLIN

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

4903 NW 59TH COURT

Suite, Apt. #, Etc.

City

COCONUT CREEK

State

FL

Zip Code

33073

**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

*Carolina Verdolin*

Date

05/09/04

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
DPST	Carolina Verdolin	1051 E Sample Rd, Suite F	Pompano Beach, FL 33064

**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)(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:**

*Carolina Verdolin*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/09/04

Date

954-782-8864

Daytime Phone #

CR2E081 (01/04)

287

**Exodus Enterprises Corp.**  
**1051 E. SAMPLE ROAD SUITE F**  
**Pompano Beach FL, 33064**

Monday, May 10, 2004

Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

To Whom it May Concern:

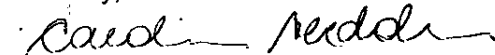
Enclosed is a Corporation Reinstatement Form for Exodus Enterprises Corp.. We would appreciate if you can reinstate the Company without penalties.

Enclosed is a check for \$300 covering the 2003 and 2004.

The Company moved its location and did not receive the documents required to renew the annual report.

Thank you for your cooperation.

Sincerely,



Carolina Verdolin, Pres