

FILED
Jun 20, 2003 8:00 am
Secretary of State

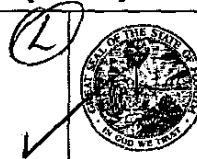
06-20-2003 90027 005 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 98000060282

1. Entity Name

Karas, Inc



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

18690 S. Dixie Hwy

Suite, Apt. #, etc.

3. Mailing Address

18690 S. Dixie Hwy

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

05-0849848

Applied For

Not Applicable

Zip

Country

USA

Zip

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Dimitrios Karachalios

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

1439 Banyan Circle

City

Pompano Bch

FL

Zip Code

33069

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

X.D. Karachalios

(NOTE: Registered Agent signature required when reinstating)

DATE

6/17/03

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Dimitrios Karachalios
1439 Banyan Circle
Pompano Bch FL 33069

TITLE
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

X.D. Karachalios

6/17/03

Date

Daytime Phone #

CR2E034B (12/02)

80126946
P98000060282

KARAS, INC.
18690 S. Dixie Highway
Miami, FL 33157

June 17, 2003

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

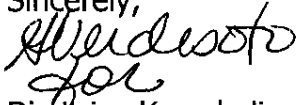
Re: KARAS, INC.
F.E.I.N. - 65-0849848

Dear Sir or Madam:

I am the President of Karas, Inc. I recently became aware that my corporation lapsed with the state. Please be advised that the necessary renewal documents were never received by my office. The mailing address currently listed with the state is not the correct address. I have enclosed a reinstatement form to update my company along with a check in the amount of \$ 150.00 for the renewal fee. Please make a note of the correct mailing address and adjust your records accordingly.

Based on the foregoing, I respectfully request that you please remove the late filing penalties and accept my reinstatement form. Your help and understanding in this matter would be greatly appreciated.

Sincerely,


Dimitrios Karachalios
President

Enclosures