

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**



**FLORIDA DEPARTMENT OF STATE**  
**Katherine Harris**  
**Secretary of State**  
**DIVISION OF CORPORATIONS**

**DOCUMENT #** P980060 65722

1 Corporation Name

Victoria's Beach & Gifts, Inc.

Principal Place of Business

Mailing Address

1600 N.E. 114th Street, Suite 202  
Miami, FL 33181

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

6650 Collins Avenue

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

P.O. Box 3652

Suite, Apt. #, etc.

4. Date Incorporated or Qualified

To Do Business in Florida

7/27/98

5. FEI Number

65-0853244

Applied For

Not Applicable

City & State

Miami Beach, FL

City & State

Deland, FL

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	Roger S. Billings	1175 West Minnesota Ave. Suite 21	Deland, FL 32720

300003079469-8

-12/23/99-01059-019

\*\*\*\*750.00 \*\*\*\*750.00

**REINSTATEMENT**

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8. Name and Address of Current Registered Agent

Kevin Billings  
1600 N.E. 114th Street, Suite 202  
Miami, FL 33181

9. Name and Address of New Registered Agent

Name  
Roger S. Billings  
Street Address (P.O. Box Number is Not Acceptable)  
1175 West Minnesota Avenue  
Suite, Apt. #, Etc.  
Suite 21  
City  
Deland State FL Zip Code 32720

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Roger S. Billings 11/30/99

REGISTERED AGENT MUST SIGN

Date

11. This corporation owes the current year  
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information on intangible tax.)

12. 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:

Roger S. Billings

President

11/30/99

Date

(904) 738-4009

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR