

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

2004BL

FILED

00 OCT 25 AM 9:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000035350

1. Corporation Name

GARSUS, INC.

Principal Place of Business

3558 DEER RUN S.
PALM HARBOR FL 34684

Mailing Address

3558 DEER RUN S.
PALM HARBOR FL 34684

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

2. New Principal Office Address, If Applicable

28870 US Hwy 19N
Suite, Apt. #, etc.
SUITE 300

3. New Mailing Office Address, If Applicable

28870 US Hwy 19N.
Suite, Apt. #, etc.
SUITE 300

City & State

Clearwater FL.

City & State

Clearwater FL.

Zip

33761

Country

Zip

33761

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/15/1999

5. FEI Number

59-356959

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

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	4 City / State / Zip
D	MARIANO, GARY A	3558 DEER RUN S.	PALM HARBOR FL 34684
D	SOLOMON, JOEL B	8203 N. DALE MABRY	TAMPA FL 33614
D	MARIANO, SUSAN	930 PLEASANT ST.	WORCESTER MA 01602
D	ROBICHAUX, TOM L	3567 DEER RUN S.	PALM HARBOR FL 34684
D	UPTON, ROBERT W <i>Delete</i>	5123 MUSSELSHELL DR.	NEW PORT RICHEY FL 34655
			SP

8. Name and Address of Current Registered Agent

MASON & ASSOCIATES, P.A.
17757 U.S. HWY 19 N., STE. 500
CLEARWATER FL 33764

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

900003471859-4

City

-11/21/00-01025-001
***150.00 FL ***150.00

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

REGISTERED AGENT MUST SIGN

Date 10/23/00

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 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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/20/00 721-422-2227

Date

Daytime Phone #

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GARSUS, INC.
28870 US Highway 19 North, Suite 300
Clearwater, FL 33761
(727) 724-5990

October 20, 2000

Florida Dept of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

RE: P99000035350

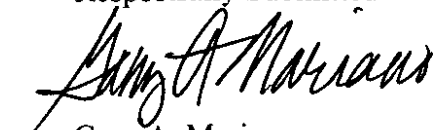
Dear Sirs;

In response to the Notice of Administrative Dissolution we received. I want to apologize for the untimely filing of this report. We are a newly formed Corporation and one of our directors, who resigned, was responsible for the corporation business. We are a new startup Internet business and are not educated to business requirements.

We have since hired an accountant who found this huge error. We sincerely request that you negate these charges and accept our deepest apologies. As a self-capitalized startup company, we cannot afford this penalty.

Thanking you in advance for your cooperation and assistance in this matter.

Respectfully Submitted


Gary A. Mariano
President/CEO