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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 03 MAY -5 PM 2: 15
DOCUMENT # P9900037/04		SECRETARY OF STATE TALLAHASSEE, FLORIDA
1. Corporation Name		
RT TAS CORP.		
		·
2. Principal Office Address	3. Mailing Office Address	1
6753 THOMASVILLE RD.	6753 THOMASVILLE RO.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	A. Pate becomparated or Qualified
<i>SUITE 108</i> City & State	SUITT /08 City & State	4. Date incorporated or Qualified To Do Business in Florida 4/23-//949
TALLAHASSE FLORIDA	TALIAHUSSEE, FLORIDA	5. FEI Number Applied For Not Applicable
32312 Country 32312 U.S.A	2ip Country 323/2 USA	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name 2 - C		
. KONAN J. SEZVA Street Address (P.O. Box Nurgber is Not Acceptable)		
2323 FOXBORO WAY		
Suite, Apt. #, Etc.		
City TALLAHASSEE		State Zip Code FL 3 2 308
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 PEGISTERED AGENT MUST SIGN		
Signature of Registered Agent Lovan T. Sava Date April 29, 2003		
Registered Agent Ri	EGISTERED AGENT MUST SIGN	Date MALLE DI
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 Eac Officer and/or Directo	
P RONAN T SAVA V TEXESA A SAVA	2323 Fox BORD Way	TALLAHASSER FL 32308
V Torse A Com	2323 Fox BORD Way	TALIAHASSET, FL 32308
TELESH H DELFH	2003 727 0000 004	780087743900, 72
		450010001004
		05/05/0301109010 **300,00
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: LONIN J. SOM APRIL 29 2003 PTO 894 1476 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		

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April 29, 2003

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

To Whom It May Concern:

I am writing to you in the hopes of having my corporate status re-instated and annual filing fees brought current for 2002 and 2003.

I did not receive any paperwork regarding renewing for 2002 after paying renewals for 2000 and 2001. In both of those years the fees were paid in January of the year as soon as the paperwork came in.

The fact that I had not paid was brought to my attention by my accountant as part of his review for filing my income taxes, otherwise I might still not have found this omission.

I would ask that consideration be given to waiving the penalties for late filing; my accountant says he will remind me to take care of all future filings, on line if possible.

I have enclosed a check for \$300.00 to cover last year's and this year's filing fees along with a completed re-instatement form.

Thank you for your assistance.

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R. J. Selva President RJ TAS Corp.

6753 Thomasville Rd. Ste. 108

Tallahassee, FL 32312