

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 18 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000038629

1. Corporation Name

Y. K.'S Restaurants, Inc.

REINSTATEMENT 02-03

400024772364
11/18/03--01005--005 **308.75

2. Principal Office Address 1988 Alt. 19 South Suite, Apt. #, etc.		3. Mailing Office Address 1988 Alt. 19 South Suite, Apt. #, etc.	
City & State Tarpon Springs, FL		City & State Tarpon Springs, FL	
Zip 34689	Country USA	Zip 34689	Country USA

4. Date Incorporated or Qualified To Do Business in Florida 04/26/1999	
5. FEI Number 593573020	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Vagelis Karatzas		
Street Address (P.O. Box Number is Not Acceptable) 1988 Alt. 19 South		
Suite, Apt. #, Etc.		
City Tarpon Springs	State FL	Zip Code 34689

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

Vagelis Karatzas
REGISTERED AGENT MUST SIGN

Date 10-21-03

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
D	Vagelis Karatzas	1988 Alt. 19 South	Tarpon Springs, FL 34689
D	Kostas Karatzas	1988 Alt. 19 South	Tarpon Springs, FL 34689

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

Kostas Karatzas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KOSTAS KARATZAS

Date

10-21-03 727-944-3330

Daytime Phone #

10-21-03

To Whom it may concern:

After speaking to one of your representatives this afternoon, I was instructed to write this letter to waive the fee of \$900.00 to re-instate my corporation to \$300.00. I did not ever receive the Annual Report stating that I had to pay a fee and file to stay incorporated. Therefore, after recently discovering that my corporation had been dissolved due to not filing my annual report, I promptly called the Department of State to resolve this dilemma. As previously stated I was instructed to write this letter explaining my situation and include the application that is attached to this letter, as well as a check for \$300.00. I included an additional \$8.75 requesting a certificate of status be mailed to me immediately. I appreciate your help in restoring my corporation to a current status promptly.

For future reference the current address is printed on the application.

I appreciate your cooperation and Thank you in advance.

Sincerely,

Kostas P. Karatzas - Director/Owner
V.K.'s Restaurants, Inc.
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