

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 182

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 MAY -7 AM 8:00

DOCUMENT # P99000067084

1. Corporation Name

L. VASSAR, INC.

Principal Place of Business

Mailing Address

599 S. FEDERAL HIGHWAY
DANIA FL 33004

599 S. FEDERAL HIGHWAY
DANIA FL 33004

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

07/22/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0935742

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. 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	4 City / State / Zip
PO	VASSAR, LYNN M	727 NE 17TH WAY	FORT LAUDERDALE FL 33304

400035733064
05/07/04--01018--002 **150.00

6/16/03 90146 014 X150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

YASSAR, LYNN
727 NE 17TH WAY
FORT LAUDERDALE FL 33304

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

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

SIGNATURE:

L. Vassar
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04
Date

954-923-6322
Daytime Phone #

CR2E040 (7/03)

282

April 29, 2004

To: Division of Corporations
Annual Report/Reinstatement Section

From: Lynn Vassar, Inc.

Ref: Reinstatement of Corporation
Document# P99000067084

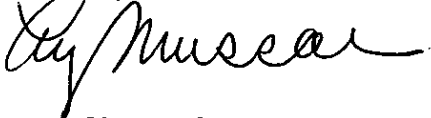
Dear Sir/Madam:

We did not receive the rejected letter sent by your office on June 18, 2003. Please reconsider and waive the reinstatement fee of \$600. I sent a check for \$150 for last year annual report, this check cleared my bank.

I'm sending another check for \$150 for my 2004 annual report dues.

Thank you in advance for helping me with this matter.

Sincerely



Lynn Vassar, Owner