

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

99 OCT -6 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000058449

1. Corporation Name

VESHNO, INC.

Principal Place of Business

Mailing Address

1881 PALM BAY ROAD, NORTHEAST
PALM BAY FL 32901

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PALM BAY FL 32901

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

07/01/1997

5. FEI Number

Applied For

Not Applicable

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 (Do NOT Use Post Office Box Numbers) | 4 City / State / Zip |
|------------|-------------------------------------|---|---|
| P | SATISH SARASWAT | 4962 EBENSBURG DR. | TAMPA, FL 33647. |
| | | | |
| | | | |
| | | | 800003022968--8 -10/22/99--01110--014 ***900.00 ***900.00 |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PRATESI, EMIL G
1253 PARK STREET
CLEARWATER FL 33756

Name SATISH SARASWAT
Street Address (P.O. Box Number is Not Acceptable) 4962 EBENSBURG DRIVE
Suite, Apt. #, Etc. TAMPA
City TAMPA State FL Zip Code 33647

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of Registered Agent

Satish Saraswat REGISTERED AGENT MUST SIGN

Date

10/6/99

11. This corporation owes or has paid 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:

Satish Saraswat REGISTERED AGENT MUST SIGN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/6/99 (813) 390-6915
Date Daytime Phone #

CR20240 (9/98)