

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 55760

1. Corporation Name
INTERCONTINENTAL SERVICES, INC

Principal Place of Business Mailing Address - SAME
11401 BISCAYNE BLVD 11401 BISCAYNE BLVD
MIAMI, FL 33181-3410 MIAMI, FL 33181-3410

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

5/17/78

5. FET Number

59-2028474

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
PRES SECT	JACK BERNSTEIN	11401 BISCAYNE BLVD	MIAMI, FL 33181-3410

400002806144--4
-03/15/99--01114--020
***1073.75 ***1073.75

8. Name and Address of Current Registered Agent

LAURENCE FEINGOLD
407 LINCOLN RD
MIAMI BEACH, FL 33139

9. Name and Address of New Registered Agent

Name **JACK BERNSTEIN**
Street Address (P.O. Box Number is Not Acceptable)
11401 BISCAYNE BLVD
Suite, Apt. #, Etc.
City **MIAMI** State **FL** Zip Code **33181-3410**

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

Jack Bernstein
REGISTERED AGENT MUST SIGN

Date **March 4, 1999**

11. This corporation owes the current year
Intangible Personal Property Tax due June 30, 1999 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)(c), 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:

Jack Bernstein

JACK BERNSTEIN

3/4/99 (305/891-0040)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date of Filing

②

Intercontinental Services, Inc.

March 4, 1999

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

Re: *Intercontinental Service, Inc.*

Dear Sir or Madam:

Please find enclosed a completed **Application For Reinstatement**, together with our check in the amount of \$1,073.75. This amount includes the \$8.75 additional for a **Certificate of Status**.

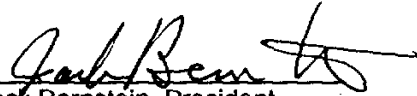
It appears that our corporation was inadvertently dissolved in 1994. Apparently, the required forms were sent to the registered agent, but never forwarded to our attention.

In view of the aforementioned, we respectfully request that the late fees for reinstatement be waived. Accordingly, we have included in our check the \$1,065.00 that we were told to forward, together with the \$8.75 for a Certificate of Status.

Thanking you in advance, I remain...

Very truly yours,

Intercontinental Services, Inc.


Jack Bernstein, President

JB/mb