

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**

1997 APR 18 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F51167

1. Corporation Name

ASTROFLASH PAN AMERICAN, INC.

Principal Place of Business

Mailing Address

ORLANDO, FLORIDA

8067 CADIZ COURT N.
ORLANDO FLORIDA 32836

000002149870--4

-04/21/97--01157--019

***1245.00 ***1245.00

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

10-27-1981

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-2150334

Not Applicable

Zip

Country

Zip

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
CHRMN. C.E.O.	AWAD, AMINE F. (DIRECTOR)	8067 CADIZ COURT N.	ORLANDO FL. 32836
EXEC. V.P.	JOHN H. HUENING (DIRECTOR)	8067 CADIZ COURT N.	ORLANDO, FL. 32836
SR.VP TREAS.	ED G. YARIAN (DIRECTOR)	8067 CADIZ COURT N.	ORLANDO FL 32836
VP & G MGR	LILY CHONG	8067 CADIZ COURT N.	ORLANDO FL 32836
SEC.	BETTY L. YARIAN	8067 CADIZ COURT N.	ORLANDO FL 32836

REINSTATEMENT '94-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name ED G. YARIAN

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

8067 CADIZ COURT N.

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32836

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

Ed G. Yarian

REGISTERED AGENT MUST SIGN

Date

4-15-97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Ed G. Yarian

ED G. YARIAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-15-97

(407)351-1499

Daytime Phone #