

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM FILED

SECRETARY OF STATE  
DIVISION OF CORPORATIONS

02 MAR 14 PM 4:00

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **NB1885**

1. Corporation Name

Pacific Asia Travel Association - Florida Chapter, Inc

**REINSTATEMENT**

2. Principal Office Address

1575 Ives Dairy Road

3. Mailing Office Address

1575 Ives Dairy Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

4. Date Incorporated or Qualified  
To Do Business in Florida

April 24, 1989

5. FEI Number

65-0128909

Applied For

Not Applicable

Zip

33179

Country

United States

Zip

33179

Country

United States

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

9/6-02

7. Name and Address of Current Registered Agent

Name

Scott R. Jay

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

1575 Ives Dairy Road

Suite, Apt. #, Etc.

City

Miami

State  
FL

Zip Code  
33179

700005193027-2  
-04/04/02--01067-023  
\*\*\*\$12.50 \*\*\*\$12.50

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

*[Signature]*

Date February 22, 2002

REGISTERED AGENT MUST SIGN

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	Gerald Bardasch	1001 Southwest 141st Avenue Apartment K110	Pembroke Pines, Florida 33027
D	Kitty Field	17335 Northeast 12th Avenue	Miami, Florida
D	Seymour Lichtenfeld	19450 Northeast 21st Court	Miami, Florida 33179

AD

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:

*[Signature]*

Seymour Lichtenfeld, February 19, 2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date (305) 932-4467 Daytime Phone #

CR2E081 (9/01)