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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

APPLICATION FOR REINSTATEMENT

QJAR

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

97 NOV -6 AM 9:17

Read Instructions on Other Side Before Making Entries
Make Check Payable To: **Department of State**

1. Name and Mailing Address of Corporation: **DOCUMENT # P96000097544**

**Red Arrow Enterprises, Inc.
141 S.W. 142 Ave.
Miami, Fl 33186**

2. If Address in Block 1 is incorrect in any way, enter the correct address below:

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Address: **14129 S.W. 142 Avenue**
City and State: **Miami, Fl** Zip Code: **33186**

3. If Principle Office Address is different from mailing address, enter address below:

Address:
City and State: Zip Code:

59-3414068

4. Date Incorporated or Qualified To Do Business in Florida: **12/3/90**

5. FEI Number: **59-3414068**

FEI Number Applied For:
FEI Number Not Applicable

6. **\$8.75 Additional Fee required for a Certificate of Status**
CERTIFICATE OF STATUS DESIRED

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
D/P/S	Sylvio De Souza	14129 S.W. 142 Avenue	Miami, Fl 33186

30000023145429--2
11/12/97--01117--010
****165.00 ****165.00

Handwritten initials and date

REGISTERED AGENT INFORMATION

8. Name and Address of Current Registered Agent

**SYLVIO De Souza
141 S.W. 142 Avenue
Miami, Fl 33186**

9. If changed, new registered agent / office

Name: **Sylvio De Souza**
Street Address (Do NOT Use P.O. Box Number): **14129 S.W. 142 Avenue**
Street Address (Do NOT Use P.O. Box Number):
City: **Miami** State: **FL** Zip: **33186**

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: **X** *[Signature]*
REGISTERED AGENT MUST SIGN

Date: **X** **11/4/1997**

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. 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.)

13. 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 of Officer or Director: *[Signature]* Date: **11/4/1997** Daytime Phone #: **(305) 444-8800**

CR23040 (8/92)

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November 1, 1997

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

Re: RED ARROW ENTERPRISES, INC.
P96000097544

To Whom It May Concern:

Enclosed please find the 1997 Annual Report Filing Form. Due to an error in your computer, we have not received any reports from your office. Therefore, we did not know that a report was required for 1997 because we incorporated the business less than a year ago, December 3, 1996.

The address in your file is: 141 S.W. 142nd Avenue
Miami, FL 33186

The correct address is: 14129 S.W. 142nd Avenue
Miami, FL 33186

Please correct your records and accept our apologies for this inconvenience as well as the payment and filing form for RED ARROW ENTERPRISES, INC.

We assure you that this incident will not happen again in the future. Please do not hesitate to contact me if you have any questions regarding this matter.

Sincerely,

Armando Hernandez, CPA

PS. PLEASE ACCEPT THE \$165 AS FULL PAYMENT. I NEVER RECEIVED ANY NOTICE. THANK YOU.