

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
FLORIDA DEPARTMENT OF STATE  
Panama B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 530308

1. Corporation Name:

BAUZA CORPORATION

Principal Place of Business

Mailing Address

3575 N.W. 14 St.

P.O. Box 520674

Miami, FL. 33125

Miami, FL. 33152

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

2. New Principal Office Address, If Applicable

3575 N.W. 14 Street

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami, Florida

City & State

Zip

33125

Country

U.S.A.

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

March 29 1977

5. FEI Number

59-1732810

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)

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
Pres.	Alexander Stratos	3575 N.W. 14 Street	Miami, FL. 33125
Sec.	Alexander Stratos	3575 N.W. 14 Street	Miami, FL. 33125
Trea.	Alexander Stratos	3575 N.W. 14 Street	Miami, FL. 33125
Vice-Pr.	Alexander Stratos	3575 N.W. 14 Street	Miami, FL. 33125

REINSTATEMENT

94-98

9-14-98

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-09/14/98--01005--021

\*\*\*1393.75 \*\*\*1350.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Alexander Stratos

3575 N.W. 14 Street

Miami, Florida 33125

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

Alexander M. Stratos  
REGISTERED AGENT MUST SIGN

Date August 31, 19 98

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.

Alexander M. Stratos

SIGNATURE: Alexander M. Stratos

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/31/98

Date

(305) 634 7003

Daytime Phone #