

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 OCT 27 PM 2:40

10/28

DOCUMENT # F88087

1. Corporation Name

FLORATECH, INC.

Principal Place of Business

Mailing Address

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

8181 N.W. 14 St.

3. New Mailing Address, If Applicable

Same

4. Date Incorporated or Qualified  
To Do Business in Florida

JULY 7, 1982

Suite, Apt. #, etc.  
Suite 250

Suite, Apt. #, etc.

5. FEI Number

59-2210431

Applied For

Not Applicable

City & State  
Miami, FL.

City & State

Zip

33126

Country

USA

Zip

Country

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.	Juan M. Holguin	3 Grove Isle Drive; #508	Coconut Grove, FL. 33133
Sec.	Philip A. Kiger	1420 Brickell Bay Drive #708	Miami, FL. 33131
			100002833291 -- 8 -10/29/97--01128--008 ***1758.75*** 1758.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

Philip A. Kiger

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

8181 N.W. 14 St.

Suite, Apt. #, Etc.

Suite 250

City

Miami

State

FL

Zip Code

33126

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

REGISTERED AGENT MUST SIGN

Date 10/21/97

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:

Philip A. Kiger

10/21/97

(305) 594-2222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2040 (12/95)