

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

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97 MAR 28 PM 2:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G17917**

1. Corporation Name

IAL LEASING, INC.

Principal Place of Business

Mailing Address

P. O. BOX 522230
MIAMI FL 33152

P. O. BOX 522230
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

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

91-97

To Do Business in Florida

01/04/1983

5. FEI Number

59-2290362

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
PDC	BACHELOR, GEORGE E	950 SE 12TH STREET	HIALEAH FL
DS	BACHELOR, ANNE O DELETE	950 SE 12TH STREET SEE ATTACHED LIST	HIALEAH FL
T	HIGGINE, JOHN J	950 SE 12TH STREET	HIALEAH FL
D	BACHELOR, MARIANNE T.	950 SE 12TH STREET	HIALEAH FL
VAG	FINAZZO, NICOLAS DELETE	950 SE 12TH STREET	HIALEAH FL
V	WALKER, RAYMOND S.	950 SE 12TH STREET	HIALEAH FL

8. Name and Address of Current Registered Agent

FINAZZO, NICOLAS
950 SE 12TH STREET
HIALEAH FL 33010

9. Name and Address of New Registered Agent

Name **MICHAEL R. HENRICKSON**
Street Address (P.O. Box Number is Not Acceptable)
950 S.E. 12th STREET
Suite, Apt. #, Etc. **900002130109--9**
City **HIALEAH** **FL 33010**
Date **3-21-97**

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

Michael R. Henrickson
REGISTERED AGENT MUST SIGN

Date **3-21-97**

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 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:

Michael R. Henrickson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL R. HENRICKSON
ASSISTANT SECRETARY

3-21-97

(305) 889-6222

Date

Daytime Phone #

CR2E040 (7/96)

OFFICERS & DIRECTORS**COMPANY: IAL LEASING, INC.**

Title	Name	Address
P/D/C	Batchelor, George E.	950 S.E. 12th Street Hialeah, FL 33010
D/S	Batchelor, Marianne T.	950 S.E. 12th Street Hialeah, FL 33010
D	Ferraresi, Daniel J.	950 S.E. 12th Street Hialeah, FL 33010
V	Walker, Raymond S.	950 S.E. 12th Street Hialeah, FL 33010
V	Mesecher, Boyd D.	950 S.E. 12th Street Hialeah, FL 33010
T	Higgins, John J.	950 S.E. 12th Street Hialeah FL 33010
AS	Henrickson, Michael R.	950 S.E. 12th Street Hialeah FL 33010
AS	Dawson, Humphrey	950 S.E. 12th Street Hialeah FL 33010