

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**

97 OCT 22 AM 11:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** G88449 (5)

1. Corporation Name

SOUND BAY IMPORT-EXPORT, INC.

Principal Place of Business

BRICKELL AVENUE  
MIAMI FLORIDA 33131

Mailing Address

BRICKELL AVENUE  
MIAMI FLORIDA 33131

**REINSTATEMENT** 97

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

2. New Principal Office Address, If Applicable

900 S.E. 1ST AVENUE

3. New Mailing Address, If Applicable

900 S.E. 1ST AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MAIMI FLORIDA

City & State

MIAMI FLORIDA

Zip

33131

Country

U.S.A.

Zip

33131

Country

U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida  
02/23/1984

5. FEI Number

59-2384799

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
D/P/T	RODOLFO JACIR	10504 S.W. 79 Place	Miami Florida 33156
D/VP	MARCELO JACIR	10504 S.W. 79 Place	Miami Florida 33156
D/	RODOLFO JACIR	10504 S.W. 79 Place	Miami Florida 33156
D/S	ANITA JACIR	10504 S.W. 79 Place	Miami Florida 33156

400002384799-0  
-10/23/97-01050-007  
\*\*\*750.00 \*\*\*750.00

8. Name and Address of Current Registered Agent

RODOLFO JACIR  
1221 Brickell Avenue  
Miami Florida 33131

9. Name and Address of New Registered Agent

Name

RODOLFO JACIR

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

900 S.W. 1st Avenue

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33131

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

*R. Jacir*

RODOLFO JACIR

REGISTERED AGENT MUST SIGN

Date OCTOBER 21, 1997.

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:

*R. Jacir*

RODOLFO JACIR

OCTOBER 21, 1997 (305) 577-7779

CR2040 (12/95)