

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



97-98 AR
Sandra L. Nathan
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JUN 19 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G97732**

1. Corporation Name

SULIK DEVELOPMENT CO., INC.

Principal Place of Business

625 BILTMORE WAY
APT. 306
CORAL GABLES FL 33134

Mailing Address

625 BILTMORE WAY
APT. 306
CORAL GABLES FL 33134

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/04/1984

5. FEI Number

NOT APPLICABLE

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)

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
PD	DAMUS, ALFRED	8145 S.W. 53RD AVE.	MIAMI FL 33143

300002570193--6
-06/23/98--01090--028
****315.00 ****315.00

8. Name and Address of Current Registered Agent

ROTH, ROBERT L. ESQ.
3155A SOUTH MIAMI AVENUE
MIAMI FL 33129

9. Name and Address of New Registered Agent

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

Date

REGISTERED AGENT MUST SIGN

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 taxes 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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/19/98

Daytime Phone #

305 537057

CP25040 (8/97)

(2)

For: Mary W. Damus
Sulik Development Co., Inc.
625 Biltmore Way, Apt. 306
Coral Gables, FL 33134

June 9, 1998

Division of Corporations
Annual Reports/Reinstatement Section
P.O.Box 6327
Tallahassee, FL 32314-6327

To whom it may concern,

As per my telephone conversation of today, I am submitting a letter of explanation along with a check for \$315.- cover my annual report fees for '97 & '98 for Sulik Development Co., Inc.

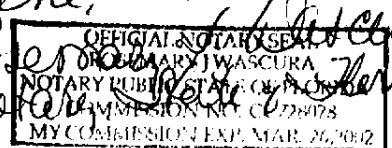
Since the beginning of this year my mother has had to be admitted to the hospital on numerous occasions due to a stroke. Unfortunately the application for reinstatement of Sulik Development Co., Inc. is delayed because my mother wasn't able to communicate the need to do and I didn't have time to sort through her paperwork until now. I understand that with this letter of explanation and a payment of \$315.- that you can file my application while waiving the reinstatement fee.

I hope that this is sufficient information to process the reinstatement. Should you need any additional information please do not hesitate to contact me at (305) 667-7671.

Thank you for your assistance,


for

Mary W. Damus

*Swoon & Subscribed before me
this 9th day of June, 1998*
Boer...


p.s. Please note the mailing address change on the application form