

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H06304

1. Corporation Name

CANINVEST, INC.

Principal Place of Business

Mailing Address

C/O RONALD E. HERZOG/BECHER, HERZOG
300 SEVILLE - SUITE 215
CORAL GABLES FL 33134

600 GRAPETREE DR
UNIT 6B SOUTH
KEY BISCAYNE FL 33149
US

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

4. Date Incorporated or Qualified
To Do Business in Florida

06/04/1984

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-2411328

Not Applicable

Zip

Country

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)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
VP	HADAR, MARGERY	177 OCEAN LANE DR.	KEY BISCAYNE FL
P	SIMONS, VICTORIA	600 GRAPETREE DR.	KEY BISCAYNE FL

300003500333--1
-12/13/00--01100--003
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HERZOG, RONALD E.
300 SEVILLE - SUITE 215
CORAL GABLES FL 33134

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

[Signature]
REGISTERED AGENT MUST SIGN

Date 10/25/00

11. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V. SIMONS
PRESIDENT

10/25/00

Date

Daytime Phone #

KE

PAK 7/12

BECHER, YEAGER, NALL, SHERBURNE, BERNARD & COMPANY

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS
CERTIFIED PUBLIC ACCOUNTANTS AND BUSINESS CONSULTANTS

300 Sevilla Avenue - Suite 215
Coral Gables, Florida 33134-6623
(305) 444-2727 Fax (305) 448-5173
WWW.BYNCPAS.COM

SHELDON H. BECHER, CPA, PA
RONALD E. HERZOG, CPA, PA
DANIEL W. NALL, CPA, PA
JOHN F. YEAGER, CPA, PA

FREDERICK SHERBURNE, CPA
JOSEPH M. BRYDON, CPA
MARIA J. ROCA, CPA
RICHARD BERNARD, CPA (RETIRED)

October 23, 2000

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: CANINVEST, INC.

To Whom It May Concern:

I am writing in reference to the above-named taxpayer. Please be advised that Mrs. Edith Rosen was in charge of the financial obligations of the corporation. Mrs. Rosen was an elderly woman who had been very ill for a few months. She was admitted into the hospital where she passed away on February 2, 2000.

Mrs. Rosen's daughters, Margery Hadar & Victoria Simons are the officers of the corporation and they just received the dissolution notice for the Corporate Annual Report. However, the previous notice was never received that is why they did not send in the payment on time. The previous notice must of been sent to Mrs. Rosen's attention and due to the crisis and hardships the family underwent the form was never located or dealt with. They are extremely sorry that the form was not filed on time but since Mrs. Rosen passed away and since there was no form they did not remember to file the return. Enclosed is our payment for \$61.25. Please take into consideration that the filing was overlooked due to overwhelming family grief and lack of receipt of the original form and abate the penalties of \$688.75.

Thank you for your attention to this matter.

Sincerely,


Ronald E. Herzog, CPA

REH/mg