

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

DOCUMENT # H99637

1. Corporation Name

SERVICE OF PROCESS, INC.

Principal Place of Business

3741 SW 132 AVE.
MIAMI FL 33175

Mailing Address

POST OFFICE BOX 2354
MIAMI FL 33245-2354

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

3741 S.W. 132 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Miami, FL

Zip

Country

Zip

33175

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

02/17/1986

5. FEI Number

59-2641075

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	PEREZ, RODOLFO	3741 SW 132 AVE.	MIAMI FL 33175
VPD	PEREZ, HILDALINA	3741 SW 132 AVE.	MIAMI FL 33175

200002839662-3
-11/06/97-01003-022
****165.00 ****165.00

VP 3-07

8. Name and Address of Current Registered Agent

PEREZ, HILDALINA
3741 SW 132 AVE.
MIAMI FL 33175

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

Hildalina Perez

REGISTERED AGENT MUST SIGN

Date

10/28/97

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 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

Hildalina Perez

VP & D 10/28/97 305-226-6809

FILED

97 OCT 31 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR20040 (8/97)

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SERVICE OF PROCESS, INC.
P.O. BOX 2354
MIAMI, FL 33245-2354
TELEPHONE NO.: (305) 226-6809
FAX NO.: (305) 551-9819

October 28, 1997

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

Re: Document # H99637
Service of Process, Inc.

Dear Sirs:

This letter will confirm my telephone conversation with your office on today's date which I informed your office that I have never received a Corporation Annual Report prior to this Notice of Revocation.

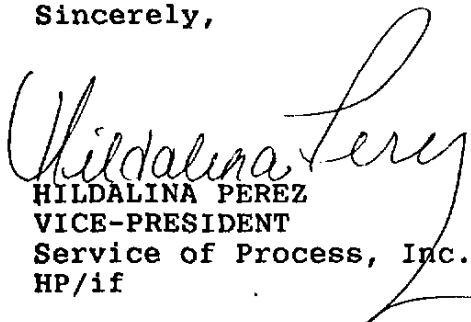
The post office box stated in the application is correct.

For any future problems I am hereby requesting to submit the annual corporation return to my principal place of business which is 3741 S.W. 132 Ave. Miami, FL 33175.

Enclosed please find my check #5455 in the amount of \$165.00 for the corresponding fee as confirmed with your office.

Thank you for your anticipated attention to this matter.

Sincerely,


HILDALINA PEREZ
VICE-PRESIDENT
Service of Process, Inc.
HP/if