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
99 APR 19 AM 10:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K03249

1. Corporation Name

SOUTHEAST EQUIPMENT INVESTMENT CORP.

Principal Place of Business	Mailing Address
7301 S.W. 100 CT. MIAMI, FL 33173	7301 S.W. 100 CT. MIAMI, FL 33173

REINSTATEMENT 98-99

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
9750 S.W. 68 STREET Suite, Apt. #, etc	9750 S.W. 68 STREET Suite, Apt. #, etc
MIAMI, FL City & State	MIAMI, FL City & State
33173 Zip / Country USA	33173 Zip / Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/23/87

5. FEI Number: 65-0016955 ☐ 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
S	EBENEZER ALMENARES	14220 LAKE CANDLEWOOD	MIAMI LAKES, FL
D	STEVE CALDERON	7301 S.W. 100TH STREET	MIAMI, FL

100002861601--8
-05/04/99--01042--004
****900.00 ****900.00

8. Name and Address of Current Registered Agent

RAUL ENRIQUEZ
7085 W 17TH CT.
HIALEAH, FL 33014

9. Name and Address of New Registered Agent

Name: RAUL ENRIQUEZ
Street Address (P.O. Box Number is Not Acceptable): 9750 S.W. 68 STREET
Suite, Apt. #, Etc:
City: MIAMI
State: FL Zip Code: 33173

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: Raul Enriquez Date: 4/8/99
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes [X] 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: Raul Enriquez RAUL ENRIQUEZ 4/8/99 (305)443-8500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E040 (1/96)