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SHUTTS & BOWEN

TEL: 305 381 9982

P. 002

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K21865

1. Corporation Name

CONTRAD, INC.

Principal Place of Business

Mailing Address

3620-NE-Miami-Place-
Miami, FL-33137------3620-NE-Miami-Place-
--Miami, FL-33137-----

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

2. New Principal Office Address, if Applicable
2000 N.W. 84th Avenue3. New Mailing Office Address, if Applicable
201 S. Biscayne Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1500 Miami Center

City & State

City & State

Miami, FL

Miami, FL

Zip

Zip

33122

Country

U.S.A.

33131

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

04/26/1988

5. FEI Number

65-0051177

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒\$0.75 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
P	Claudio Osorio	15 West Star Island Drive	Miami Beach, FL 33139
S	Antonio Boccalandro	8200 Los Pinos Boulevard	Coral Gables, FL 33143

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-10/02/98--01094--007
****908.75 ****908.75

8. Name and Address of Current Registered Agent

Stephen R. Rapport
600 Franklin International Plaza
201 Alhambra Circle
Coral Gables, FL 33134, U.S.A.

9. Name and Address of New Registered Agent

Name
Corporation Company of Miami
Street Address (P.O. Box Number is Not Acceptable)
201 S. Biscayne Blvd.
Suite, Apt. #, Etc.
1500 Miami Center
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 607.0606, F.S.

Signature of
Registered Agent

By:

Lorraine A. Landau

Date

September 30, 1998

LORRAINE A. LANDAU, Assistant Secretary

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)(b), 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTONIO BOCCALANDRO,
Secretary9/30/98 (305) 908-7217
Date Daytime Phone