

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

98 JUN 25 PM 3:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K22868

1. Corporation Name

DAPP COLOR GRAPHICS, INC.

Principal Place of Business

Mailing Address

45 E. 9th COURT
HIALEAH, FL 33010

SAME

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

2. New Principal Office Address, If Applicable

45 E. 9th COURT
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

45 E. 9th COURT
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

5/17/88

5. FEI Number

65-0048671

Applied For

Not Applicable

City & State

HIALEAH, FL

City & State

HIALEAH, FL

Zip

33010

Country

DADE, USA

Zip

33010

Country

USA

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
PRES	JUAN GOMEZ	3591 E. 5th AVENUE	HIALEAH, FL 33013
V. PRES	Humberto Santana	839 NW 132nd CT.	Miami, FL 33182
			4000002578264 - G
			-07/01/98 - 01102 - 004
			***1200.00 ***1200.00

8. Name and Address of Current Registered Agent

JUAN GOMEZ
3591 E. 5th AVE.
HIALEAH, FL 33013

9. Name and Address of New Registered Agent

Name
JUAN GOMEZ
Street Address (P.O. Box Number is Not Acceptable)
3591 E. 5th AVE.
Suite, Apt. #, Etc.

City
HIALEAH

State
FL

Zip Code
33013

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 6/24/98

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] JUAN GOMEZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/24/98 305-389-8587

Date

Daytime Phone #

CR2E040 (1/98)