

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUN -4 PM 5:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L10296**

1. Corporation Name

LUZ INTERNATIONAL, INC.

REINSTATEMENT

03-09

Principal Place of Business

Mailing Address

13780 SW 56TH ST
#227
MIAMI FL 33175
US

13780 SW 56TH ST
#227
MIAMI FL 33175
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

~~15136 S.W. 58th Street~~
Suite, Apt. #, etc.

~~15136 S.W. 58th Street~~
Suite, Apt. #, etc.

City & State
Miami, Florida

City & State
Miami, Florida

Zip Country

Zip Country

~~33193 Miami Dade~~

~~33193 Miami Dade~~

4. Date Incorporated or Qualified
To Do Business in Florida

08/21/1989

5. FEI Number

65-0150391

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	4 City / State / Zip
PTD	BLANDON, LUZ M.	15136 S.W. 58TH STREET	MIAMI FL
VSD	BLANDON, FELIPE	15136 S.W. 58TH STREET	MIAMI FL
D	BLANDON V. FELIPE A, JR.	15136 S.W. 58TH STREET	MIAMI FL
D	BLANDON V. MARIA A.	15136 S.W. 58TH STREET	MIAMI FL

100037665311
06/04/04--01033--002 **\$900.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BLANDON, LUZ M.
15136 S.W. 58TH STREET
MIAMI FL 33183

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. or 617.0505, F.S.

Signature of
Registered Agent

Luz Maria Blandon
REGISTERED AGENT MUST SIGN

Date **06/02/04**

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

Luz Maria Blandon
06/02/04 305-3868200.
Date Daytime Phone #

CR2E040 (7/03)