

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

AND  
FILED

1998 MAR 12 PM 1:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L13154

1. Corporation Name

ATLANTIS Ventures Corp.

Principal Place of Business

Mailing Address

7695 SW 104 STREET  
Suite 210  
MIAMI FL 33156

SAME

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

7695 SW 104 ST.

Suite, Apt. #, etc.

Suite 210

City & State

MIAMI

FL

Zip

33156

Country

USA

3. New Mailing Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

8/30/89

5. FEI Number

06-0207877

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
P/D	ERIC P. LITTMAN	7695 SW 104 ST. #210	MIAMI FL 33156
			600002456726--9
			03/13/98--01072--004
			***1650.00 ***1650.00

REINSTATEMENT

02-98  
100  
3/12/98

8. Name and Address of Current Registered Agent

ERIC P. LITTMAN  
7695 SW 104 STREET  
Suite 210  
MIAMI FL 33156

9. Name and Address of New Registered Agent

Name  
ERIC P. LITTMAN  
Street Address (P.O. Box Number is Not Acceptable)  
7695 SW 104 STREET  
Suite, Apt. #, Etc.  
Suite 210  
City  
MIAMI  
State  
FL  
Zip Code  
33156

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

REGISTERED AGENT MUST SIGN

Date

3-11-98

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

(See other side for information  
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

ERIC P. LITTMAN 3/11/98 305 16633333