

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

96 DEC 13 PM 2:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L45672

1. Corporation Name

W.L. LITHO INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

1045 East 16th Street
Hialeah, FL 33010

REINSTATEMENT 96

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
17677 Charnwood Drive

3. New Mailing Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida
1/29/1990

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

Boca Raton, FL 33498

City & State

65-0168392

Not Applicable

Zip

33498

Country

USA

Zip

Country

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P/D	IRENA EUGENIA SAS	17677 Charnwood Drive	Boca Raton, FL 33498

700002033287--3
-12/19/96--01014--022
****375.00 ****375.00

JB 12-13-96

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Irena Eugenia Sas
17677 Charnwood Drive
Boca Raton, FL 33498

Name

Alan C. Gold, Esquire

Street Address (P.O. Box Number is Not Acceptable)

7000 Southwest 62 Avenue

Suite, Apt. #, Etc.

Penthouse B

City

South Miami

State

FL

Zip Code

33498

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

11/29/96

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:

Irena E. Sas IRENA E. SAS CEO

Date

11-29-96 561-451-

Daytime Phone # 42278