

# APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

1999 AUG 13 PM 3:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Read Instructions on Other Side Before Making Entries  
Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT # L83898

D'FRANCELLY, INC  
1 SW 107 AVE  
MIAMI FL 33174

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address  
9613 WEST FLAGLER STREET

Address

City and State  
MIAMI, FL

Zip Code  
33174

REINSTATEMENT

AD

98-99

3. Date Incorporated or Qualified  
To Do Business In Florida  
06-28-1990

4. FEI Number  
65-0209096

FEI Number Applied For

FEI Number Not Applicable

5. \$8.75 Additional Fee required  
for a Certificate of Status  
CERTIFICATE OF STATUS DESIRED ☒

6. Names and Street Addresses of Each Officer and/or Director

1. Title	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 and State
D	GONZALEZ, DANIEL	125 S W 84 AVE	MIAMI FL 33174
S	GONZALEZ, FRANCIS M.	125 S W 84 AVE	MIAMI FL 33174

600002969856--4  
-08/25/99--01073--015  
\*\*\*\*908.75 \*\*\*\*908.25

## REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GONZALEZ, DANIEL  
1 S W 107 AVE  
MIAMI FL 33174

8. Name and Address of New Registered Agent and/or Office

Name

Street Address (Do NOT Use P.O. Box Number)

9613 WEST FLAGLER ST

Street Address (Do NOT Use P.O. Box Number)

City and State

MIAMI

FL.

Zip

33174

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

*Daniel Gonzalez*

REGISTERED AGENT MUST SIGN

Date 08-06-1999

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐

(See other side for additional information)

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)

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 of  
Officer or Director

*Daniel Gonzalez*

Date 08-06-1999

Daytime Phone # 305-227-9870

Typed or printed name of signing officer or director

DANIEL GONZALEZ

CR2040 (8/92)