

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 JAN 28 PM 2:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # M16556

1. Corporation Name

BLACK LION AVIATION CORP.

Principal Place of Business

Mailing Address

9552 NW 38TH STREET  
MIAMI FL 33178

9552 NW 38TH STREET  
MIAMI FL 33178

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

06/11/1985

5. FEI Number

59-2548711

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DP	DUNN, GREGORY	3525 ESTEPONA AVENUE	MIAMI FL 33178
DS	DUNN, PHILIP	3525 ESTEPONA AVE.	MIAMI FL

400027698554  
01/28/04--01004--005 \*\*150.00

400027698554  
01/28/04--01004--005 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LAMONT & NEIMAN, P.A.  
ONE BISCAYNE TOWER  
TWO SOUTH BISCAYNE BOULEVARD, SUITE 3550  
MIAMI FL 33131

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

*Robert S. Lamont, President*  
*Lamont & Neiman, P.A.*  
REGISTERED AGENT MUST SIGN

Date

01/23/2004

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:

*Phil Dunn*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

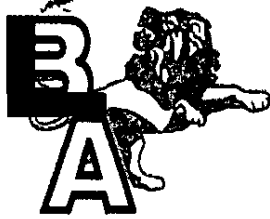
Date

1/20/04

Daytime Phone #

305-418-4252

CR2E040 (7/03)



Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

1/20/04

To Whom-It May Concern:

After speaking with someone in your Tallahassee office, I have enclosed two checks for \$150.00 each to cover the cost of the 2003 and 2004 corporate annual report/uniform business report for Black Lion Aviation.

The 2003 report was filed in a timely manner and mailed with our check #2185. After sorting through our bank account information, we have confirmed that this check was never deposited by the Department of State. We will cancel it in our records.

Please accept this new check for payment of the 2003 fees and process our payment for the 2004 fees. Please feel free to contact me if there are any further questions.

Thank you,

Philip Dunn  
Secretary – Black Lion Aviation

**Black Lion Aviation**

9552 NW 38<sup>th</sup> St. • Miami, FL 33178 • Phone: 305 418-4252 • Fax: 305 463-7462  
[www.blacklionaviation.com](http://www.blacklionaviation.com)