

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 SEP 23 AM 8:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000000030

1. Corporation Name

Sak Pase, Inc.

REINSTATEMENT 07-09

500160964195
09/23/09--01037--005 **367.50

CR2E081 (12/08)

2. Principal Office Address - No P.O. Box #

300 S. Biscayne River Dr.

Suite, Apt. #, etc.

3. Mailing Office Address

300 S Biscayne River Dr.

Suite, Apt. #, etc.

City & State

North Miami, FL

Zip

33161

Country

USA

City & State

North Miami, FL

Zip

33161

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

04/27/2004

5. FEI Number

65-0459690

Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Vladimir Lescouflair

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

617 S. State Rd. 7, Apt 11

Suite, Apt. #, Etc.

Apt. 11

City

Margate

State

FL

Zip Code

33068

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Vladimir Lescouflair

REGISTERED AGENT MUST SIGN

Date 9/20/09

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
C	Frantz Edouard	5851 Holmberg Rd. #2215	Parkland, FL 33067
VC	Curtis Henry	1192 NW 40th Ave. #503	Lauderhill, FL 33313
T	Alex Emmanuel	1851 NE 159th St.	N Miami Beach FL 33162
S	Gwen West	13090 Griffin Blvd	N Miami, FL 33161
PDP	Vladimir Lescouflair	617 S. State Rd 7, #11	Margate, FL 33068
BMD	Peralta Cassagnol	7491 Parkside Lane	Margate, FL 33063

10. 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 contained in Chapter 119, 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:

Vladimir Lescouflair

Vladimir Lescouflair

9/20/09

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

209/24