

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICA
REINSTATEMENT

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

APPROVED
AND
FILED

98 DEC 21 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000001406

1. Corporation Name

COMMERCIAL DISPUTE RESOLUTION CENTER OF THE AMERICAS, INC.

Principal Place of Business 200 S. BISCAYNE BLVD. SUITE 5300 MIAMI FL 33131-2339	Mailing Address 200 S. BISCAYNE BLVD. SUITE 5300 MIAMI FL 33131-2339
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 1390 BRICKELL AVE Suite, Apt. #, etc. SUITE 275 City & State MIAMI FL Zip 33131 Country USA	3. New Mailing Office Address, If Applicable 1390 BRICKELL AVE Suite, Apt. #, etc. SUITE 275 City & State MIAMI FL Zip 33131 Country USA
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4. Date Incorporated or Qualified To Do Business in Florida 03/13/1996	5. FEI Number 65-0652009	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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	BURTON, LANDY	ONE S.E. 30TH AVE 28TH FL ONE S.E. 3RD AVE, 28TH FL	MIAMI FL 33131
D	JUNCADELLA, SALVADOR J	200 S. BISCAYNE BLVD., SUITE 5300 200 S. BISCAYNE BLVD, SUITE 5300	MIAMI FL 33131
D	SANTOS, JOSE A JR.	201 S. BISCAYNE BLVD., SUITE 300 201 S. BISCAYNE BLVD, SUITE 3000	MIAMI FL 33131
D	MASON, PAUL E	200 S. BISCAYNE BLVD., SUITE 5300 1390 BRICKELL AVE, SUITE 275	MIAMI FL 33131
D	MARKUS, ANDREW J	201 S BISCAYNE BLVD 25TH FL	MIAMI FL 33131
D	CAPABLANCA, FERNANDO	701 BRICKELL AVE STE 2050 701 BRICKELL AVE, STE 2050	MIAMI FL 33131

8. Name and Address of Current Registered Agent MASON, PAUL E 200 S. BISCAYNE BLVD. SUITE 5300 MIAMI FL 33131-2339	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code
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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: Paul E. Mason **REQUIRED** Date: 12/7/98

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☐ N/A (See other side for information on intangible tax.)

12. 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: Paul E. Mason **REQUIRED** 12/7/98 (305) 372-1901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #