

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 MAY -2 PM 2:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000032353

1. Corporation Name

FRANK CASTRO CORPORATION

Principal Place of Business

Mailing Address

~~100 EAST 16TH STREET~~ 11261 SW 176 ST. ~~100 EAST 16TH STREET~~ 11261 SW 176 ST
~~HIALEAH FL 33018~~ MIAMI FL 33157 ~~HIALEAH FL 33018~~ MIAMI FL 33157



REINSTATEMENT 01-02

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

4. Date Incorporated or Qualified
To Do Business in Florida

03/29/2000

Suite, Apt. #, etc.

11261 SW 176 STREET

Suite, Apt. #, etc.

11261 SW 176 STREET

City & State

MIAMI FL 33157

City & State

MIAMI FL 33157

Zip

33157

Country U.S.

Zip 33157

Country U.S.

5. FEI Number

65-1013936

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
PD	CASTRO, FRANCISCO	190 EAST 16TH STREET 11261 SW 176 STREET	HIALEAH FL 33018 MIAMI FL 33157

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05/14/02--01011--011

****900.00 ****900.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CASTRO, FRANCISCO
190 EAST 16TH STREET
~~HIALEAH FL 33018~~

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.

Signature of
Registered Agent

Francisco Castro A.

REGISTERED AGENT MUST SIGN

Date

4/12/2002

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:

Francisco Castro A.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/12/2002

CR2E040 (8/01)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 23, 2002

FRANK CASTRO CORPORATION
11261 SW 176 STREET
MIAMI, FL 33157

SUBJECT: FRANK CASTRO CORPORATION
Ref. Number: P00000032353

We have received your document for FRANK CASTRO CORPORATION and check(s) totaling \$750.00. However, your check(s) and document are being returned for the following:

The total amount due to reinstate is \$900.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Justin M Shivers
Document Specialist

Letter Number: 202A00024175