

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

02 NOV 27 PM 6:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000050582

1. Corporation Name

EHUNTER, INC.

Principal Place of Business

8725 N.W. 18TH TERRACE PH
400
MIAMI FL 33172

Mailing Address

8725 N.W. 18TH TERRACE PH
400
MIAMI FL 33172



100009355431

12/04/02--01082--018 **150.00

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

05/22/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-1009621

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	BLANCO, ABE D	8725 N.W. 18TH TERRACE PH	MIAMI FL 33172
D	LLADO, EDDIE	8725 N.W. 18TH TERRACE PH	MIAMI FL 33172
D	ROIZ, CRES	8725 N.W. 18TH TERRACE PH	MIAMI FL 33172
D	KAUFMAN, SEAN M.D.	8725 N.W. 18TH TERRACE PH	MIAMI FL 33172

8. Name and Address of Current Registered Agent

REINER, SAMUEL B
7700 N. KENDALL DR., SUITE 303
MIAMI FL 33156

9. Name and Address of New Registered Agent

Name BLANCO, ABELARDO
Street Address (P.O. Box Number is Not Acceptable)
8725 NW 18TH TERR
Suite, Apt. #, Etc.
PTA
City MIAMI State FL Zip Code 33172

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

REGISTERED

REGISTERED AGENT MUST SIGN

Date

11/26/02

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:

REGISTERED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/26/02 305 392-6316

CR2E040 (8/02)



8725 NW 18th Terrace #400
Miami, Florida 33172
E-Mail: Info@eHunter.com

Ph: (305) 718-9277
Fax: (305) 718-9276
Toll-Free: (866) EHUNTER

November 26, 2002

EHUNTER, Inc

To Whom It May Concern:

Enclosed please find a completed application for reinstatement for EHUNTER, INC. We did not receive the original notices for the 2002 Uniform Business Report Form as we have received on previous years.

We are respectfully requesting that you waive the penalties for late filing and reinstate our corporation as soon as possible.

Should you have any questions, please contact me at your earliest convenience at 305-477-7303.

Sincerely,

Abe D Blanco
Vice President

