

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 JAN -9 AM 10:09

DOCUMENT # P00000066613

1. Corporation Name

BOGAN INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

3520 NW 85TH WAY #302
SUNRISE FL 33357

3520 NW 85TH WAY #302
SUNRISE FL 33357



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

07/10/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-1025855

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)

Title(s)

Name of Officers
and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

D

SIMON A, BOGAN

3520 NW 85th Way

Sunrise, FL 33357

6000004769396--9
-01/11/02--01048--015
****300.00 ****300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BORTOLIN, SONIA ESQ.

7101 W. MCNAB ROAD

SUITE 200

TAMARAC FL 33321

Name

BORTOLIN & ASSOCIATES, P.A.

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

524 S. Andrews Avenue

Suite, Apt. #, Etc.

JUSTICE BUILDING Suite 101N

City

FT. LAUDERDALE

State

FL

Zip Code

33301

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

by: Sonia Bortolin, Esq.

Date 10.29.01

REGISTERED AGENT MUST SIGN

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10.29.01

Daytime Phone #

CR3E040 (8/01)

January 7, 2002

FLORIDA DEPARTMENT OF STATE

Division of Corporations

409 East Gaines Street

Tallahassee, FL 32399

RE: 2001 UBR Report and Reinstatement form for Bogan International, Inc.

To Whom It May Concern:

This letter is to inform you that this corporation never received the UBR Report for the year 2001, but we received the notice of dissolution.

As per the recording in the DOS, we are enclosing to this letter a check number 1076 of Bank of America, in the amount of \$300.00 and the corresponding 2001 UBR report and reinstate the corporation as soon as possible. We thank you very much for your help.

Sincerely,


Simon Bogan, Director