

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

01 DEC 21 PM 4:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00000090501**

1. Corporation Name

TANNY RODRIGUEZ, P.A.

Principal Place of Business

**9946 NW 51 TERRACE
MIAMI FL 33178**

Mailing Address

**9946 NW 51 TERRACE
MIAMI FL 33178**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
9946 NW 51 TERRACE

Suite, Apt. #, etc.

City & State
MIAMI FLORIDA

Zip Country
33178 U.S.A.

3. New Mailing Office Address, If Applicable
9946 NW 51 Terr.

Suite, Apt. #, etc.

City & State
Miami FL

Zip Country
33178 U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

09/25/2000

5. FEI Number

65-1053673

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
D	RODRIGUEZ, TANNY	9946 NW 51 TERRACE	MIAMI FL 33178

300004769579--7
-01/11/02--01054--024
******750.00 ****750.00**

8. Name and Address of Current Registered Agent

GAVIRIA, JORGE
9769 S DIXIE HWY STE 101
MIAMI FL 33156

9. Name and Address of New Registered Agent

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

REGISTERED AGENT MUST SIGN

Date **Dec 17, 2001**

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

TANNY RODRIGUEZ

Date

Daytime Phone #

Dec 17, 2001 (305) 970-1833

CP2E040 (8/01)