

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P00000095081

1. Corporation Name

UNITED CHEMICAL INTERNATIONAL, INC.

Principal Place of Business

6900 SW 21 COURT BAY 13
DAVIE FL 33317

Mailing Address

6900 SW 21 COURT BAY 13
DAVIE FL 33317

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/09/2000

5. FEI Number

65-1044829

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

City / State / Zip

PTD

NICHOLS, DORAND A

13408 NW 5 PL

PLANTATION FL 33325

SD

NICHOLS, TARA

13408 NW 5 PL

PLANTATION FL 33325

~~2440 S.W. 102ND DR DAVIE, FL 33325~~
~~PLEASE CORRECT - NEW ADDRESS -~~

8. Name and Address of Current Registered Agent

HAYDEN, STEPHEN M
275 NE 48 STREET
POMPANO BEACH FL 33064

9. Name and Address of New Registered Agent

Name

DORAND NICHOLS

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

2440 S.W. 102ND DRIVE

Suite, Apt. #, Etc.

City

DAVIE

State

FL

Zip Code

33324

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 10/23/02

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/23/02 954-236-6363

CR2E040 (8/02)



2052
UNITED
CHEMICAL INTERNATIONAL

6900 SW 21st COURT #13

DAVIE, FL 33317

October 23, 2002

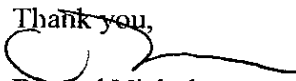
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: Uniform business report

To whom it may concern:

Please see the enclosed form for reinstatement. Please note the changes in addresses and Registered agent. We have not received any prior notices. Please accept our check for \$150.00 and make the highlighted changes to our records.

Thank you,


Dorand Nichols
President

