

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P020000 82271

03 DEC 11 AM 11:36

APPLIED CAPITAL CORP



SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5911 GRANADA BLVD
Suite, Apt. #, etc.

3. Mailing Address
P O BOX 133483
Suite, Apt. #, etc.

700024698347

11/14/03--01011--009--**550.00

REINSTATEMENT 03

4. City & State
CORAL GABLES FL
33146

Country
USA

5. City & State
MIAMI FL
33013

Country
USA

6. FEE Number
522373735

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name
DAVID G BATTINGER

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

5911 GRANADA BLVD
CORAL GABLES

FL 33146

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IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTSDCM
DAVID BATTINGER
5911 GRANADA BLVD
CORAL GABLES FL 33146

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE
DAVID BATTINGER

11/11/2003 (305) 236-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone (none #)

CR2E034B (12/02)

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the controller or trustee employed to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 10 or in an attachment with an address with all other lines enclosed.

APPLIED CAPITAL CORP
PO BOX 13-3483
HIALEAH FL 33013-3483

28 November 2003 (First Letter)
December 09, 2003 (Second Letter via E-Mail)

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
Corporate Records
P O Box 6327
Tallahassee FL 32314

RE: Reference Number P02000082271

TO Whom It May Concern:

I did not receive the Uniform Business Report for this corporation. Consequently, the corporation was administratively dissolved on September 19th, 2003. I was not aware that, I did not have to pay the \$550.00 reinstatement fee, as, through no fault of my own, I could not file, timely, as, I did not receive the UBR. However, I did send in my check #552, for that amount, \$550.00. This check cleared my bank on November 18th, 2003.

I am requesting reinstatement, due to, not having received the Uniform Business Report. I request that:

1. This corporation be reinstated, IMMEDIATELY.
2. That a certificate of status be issued and mailed, to the address above
3. That, of the \$550.00 I overpaid:
 \$150.00 be applied to the filing fee
 \$8.75 be applied to the certificate of status

AND; the balance of \$391.25 be refunded to me, with the check made payable
TO: David G Baitinger, as, check #552, for \$550.00, was a personal check, not a
company check.

ALSO, please be advised, the correct, and corrected mailing address on the UBR
downloaded from your website, filled out and signed, is the mailing address at the top of
this letter.

Thank you for your prompt and immediate attention to this matter.

Sincerely,


David G Baitinger