

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P02000108865

1. Corporation Name

CORPORATE ASSET SERVICES, INC.

Principal Place of Business

7934 NW 163RD TERRACE  
MIAMI FL 33016

Mailing Address

7934 NW 163RD TERRACE  
MIAMI FL 33016

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/09/2002

5. FEI Number

06-1651495

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)

| 1<br>Title(s)                      | 2<br>Name of Officers<br>and/or Directors          | 3<br>Street Address of Each<br>Officer and/or Director      | 4<br>City / State / Zip                          |
|------------------------------------|--|---|--|
| PRES                               | SOTO, RAUL JR.                                     | 7934 NW 163RD TERRACE                                       | MIAMI FL 33016                                   |
| <del>VP</del><br><del>DELETE</del> | <del>MIRANDA, JOSE LUIS</del><br><del>DELETE</del> | <del>3811 NW 160TH AVENUE APT. 1</del><br><del>DELETE</del> | <del>MIRAMAR FL 33027</del><br><del>DELETE</del> |
|                                    |  |   |  |
|                                    |  |   |  |
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|                                    |  |   |  |

400023870964

10/17/03--01022--029 \*\*150.00

8. Name and Address of Current Registered Agent

SOTO, RAUL JR.  
7934 NW 163RD TERRACE  
MIAMI FL 33016

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. or 617.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/10/03

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

10/10/03 305-992-3348

Daytime Phone #

CR2040 (7/03)



**CORPORATE ASSET**  
Services, Inc.

October 10, 2003

Florida Department of State  
Glenda E. Hood  
Secretary of State  
Divisions of Corporations

Dear Ms. Hood:

As an officer of this company I hear by state that Corporate Asset Services has moved its physical address three times over the last 12 months. Quite possibly, as a result of these relocations, we had not received the two prior Uniform Business Report notices.

Therefore, Corporate Asset Services is complying with the State of Florida's requirement of filing as a "for-profit" corporation.

Attached, please find a check in the amount of \$ 150.00 (US) for the filing fee..

I thank you, and in the interim if there are any questions, please call our office at (305) 819-4443.

Respectfully,

Raul Soto Jr.  
President  
Corporate Asset Services, Inc.