

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

APPLICATION
FOR
REINSTATEMENT



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

FILED

03 OCT 21 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000131894**

1. Corporation Name

NAVICO GROUP, INC.

Principal Place of Business

7177 W. OAKLAND PARK BLVD
LAUDERHILL FL 33313

Mailing Address

7177 W. OAKLAND PARK BLVD
LAUDERHILL FL 33313



REINSTATEMENT

03

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

12/12/2002

5. FEI Number

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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PT	YI, JOSEPH	936 SW 112TH TERRACE	PEMBROKE PINES FL 33025
VS	YI, DAVID	936 SW 112TH TERRACE	PEMBROKE PINES FL 33025

400023965194
10/21/03--01040--006 **150.00

8. Name and Address of Current Registered Agent

YI, JOSEPH
936 SW 112TH TERRACE
PEMBROKE PINES FL 33025

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 10/17/03

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:

JOSEPH YI

10/17/03

954-478-7277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

2/2

Navico Group, Inc.

7177 W Oakland Park Blvd
Tel: 954-741-2452
Fax: 954-741-2453

October 17, 2003

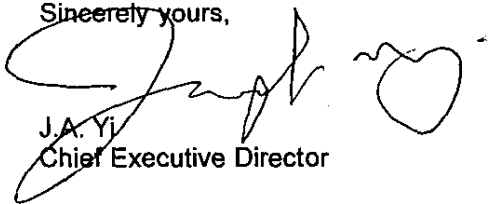
To: Florida Department of State
C/O Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Re: Uniform Business Report

To Whom It May Concern:

We have not received the prior UBR notices. Please waive the reinstatement fee as informed.
Thank you for your service.

Sincerely yours,



J.A. Yi
Chief Executive Director