

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 DEC 19 AM 11:02

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 03000065011

1. Corporation Name

K RD New Investments Corp

2. Principal Office Address

855 NW 45 ave

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33126

Country

U.S.

3. Mailing Office Address

19200 E Oakmont Dr

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33015

Country

U.S.

REINSTATEMENT 05-06
CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

06-12-2003

5. FEI Number

510470486

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Antonio Rodriguez

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

19200 E Oakmont Dr

Suite, Apt. #, Etc.

City

Miami FL

State

FL

Zip Code

33015

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DPST	Antonio Rodriguez	19200 E Oakmont Dr	Miami, FL, 33015
	12/20		

10. 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 contained in Chapter 119, 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:

Antonio Rodriguez

Date

12-10-06

Daytime-Phone #

(305) 216 7161

(305) 200 1011