PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 DEC 18 PM 1:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92 0000 2418

3000004743233--8
-12/28/01--01082--004
****908.75 ****908.75

1. Corporation Name

Phoenix Design & Development, Inc.

REINSTATEMENT 00-01

2. Principal Office Address	**3. Mailing Office Address**
1122 N.W. 3RD ST	P.O. BOX 560099
Suite, Apt. #, etc.	Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida 10/30/92

City & State	City & State		
MIAMI FL	MIAMI FL	**5. FEI Number** 650405805	Applied For / Not Applicable
Zip 33128	Country USA	Zip 33256	Country USA

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name	HENRY RODRIGUEZ
Street Address (P.O. Box Number Is Not Acceptable)	1157 SW 5TH STREET
Suite, Apt. #, Etc.	
City MIAMI	State FL Zip Code 33130

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 _____ *Henry Rodriguez*
REGISTERED AGENT MUST SIGN Date 12/13/01

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
D	HENRY RODRIGUEZ	1157 SW 5 STREET	MIAMI FL 33130

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 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: *Henry Rodriguez* HENRY RODRIGUEZ D 12/13/01 305·667·6111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #