

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 JUL 30 AM 10:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DOCUMENT #

P92000011079

1. Corporation Name

Davos Corporation

2. Principal Office Address

201 S. Biscayne Blvd.

3. Mailing Office Address

201 S. Biscayne Blvd.

Suite, Apt. #, etc.

Suite 850

Suite, Apt. #, etc.

Suite 850

City & State

Miami, FL

City & State

Miami, FL

Zip

33131

Country

USA

Zip

33131

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

12/10/92

5. FEI Number

59-3215415

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

Rossz Fiu Corporation

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

201 S. Biscayne Blvd.

Suite, Apt. #, Etc.

Suite 850

City

Miami,

State  
FL

Zip Code  
33131

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.

Rossz Fiu Corporation

Signature of  
Registered Agent

By: Jan Carson Cheezem, President, Date 7/25/01  
REGISTERED AGENT MUST SIGN President

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	Alexis Ougrik	201 S. Biscayne Blvd., Suite 850	Miami, FL 33131
AS	Jan Carson Cheezem	201 S. Biscayne Blvd., Suite 850	Miami, FL 33131

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jan Carson Cheezem  
Assistant Secretary

7/23/01 (305) 702-3000

Date

Daytime Phone #

CFR2001 (9/00)