H99000003888 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

99 FEB 17 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000011809

1 Corporation Name

AME INTERNATIONAL CORP.

Principal Place of Business	Mailing Address
12903 SW 51 STREET MIAMI FL	

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

2 New Principal Office Address, If Applicable	3 New Mailing Office Address, If Applicable
5756 W FLAGLER ST	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
MIAMI FL	
Zip 33144 County USA	Zip Country

4 Date Incorporated or Qualified To Do Business in Florida: 12-15-92

5. FEI Number: 65-0396871 ☐ 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)

Type(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	ELIZARDO URENA	17840 NW 47 AVENUE.	CAROL CITY FL 33055

8. Name and Address of Current Registered Agent

ANGEL MERINO
12903 SW 51 STREET
MAIMI FL

9. Name and Address of New Registered Agent

Name: ELIZARDO URENA
Street Address (P.O. Box Number is Not Acceptable): 17840 NW 47 AVENUE
Suite, Apt. #, Etc.:
City: CAROL CITY State: FL Zip Code: 33055

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.

Signature of Registered Agent X [signature] REGISTERED AGENT MUST SIGN Date 1-27-99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on intangible tax.)

12. 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.

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SIGNATURE: [signature] 1-27-99 305-625-6262
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Prepared By: Damar Enterprises 1550 W. 84th St. #77
Hialeah Fl 33014 (3051558 4947

CR2E401(1/98)

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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To:
Division of Corporations
Fax Number : (850)922-4004

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

CORPORATION REINSTATEMENT

AME INTERNATIONAL CORP.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	$1,508.75