

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

00 JUN -8 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000027879

1. Corporation Name

DATACORP INTERNATIONAL INC.

Principal Place of Business

Mailing Address

7891 WEST FLAGLER STREET SUITE #367
MIAMI, FLORIDA 33144-2376

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

7891 WEST FLAGLER ST

Suite, Apt. #, etc.

Suite Apt. #, etc. 367

City & State
MIAMI, FLORIDA

City & State

Zip 33144

Country

U.S.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

4/14/1993

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 (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
President	PEDRO M. LAU	7891 W. FLAGLER ST SUITE #367	MIAMI, FL 33144
Vice Pres	PEDRO M. LAU	11 11	400003298624--8 -06/21/00--01034--011
Treas	PEDRO M. LAU	11 11	***1200.00 ***1200.00 11 11
Secy	PEDRO M. LAU	11 11	11 11

REINSTATEMENT 97-00
MKT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PEDRO M. LAU
7891 WEST FLAGLER STREET SUITE #367
MIAMI, FLORIDA 33144

Name

PEDRO M. LAU

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

7891 WEST FLAGLER STREET

Suite, Apt. #, Etc.

367

City

MIAMI

State

Zip Code

FL

33144

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

REGISTERED AGENT MUST SIGN

Date

06/07/00

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.

SIGNATURE:

PEDRO M. LAU

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

06/07/00

Daytime Phone #

305-525-6051