

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

1998 FEB -9 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000087932

1. Corporation Name

Amethyst International Corp.

Principal Place of Business
Miami Beach, Florida

Mailing Address
**10155 Collins Avenue
Unit, 303
Miami Beach, Florida
33154**

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
10155 Collins Avenue

4. Date Incorporated or Qualified To Do Business in Florida

December 21, 1993

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Unit 303

5. FEI Number

65-0455884

Applied For

Not Applicable

City & State

City & State
Miami Beach, Florida

Zip

Country

Zip
33154

Country
USA

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1. Director	Aldo Antonio Rafael Raia	10155 Collins Avenue #301	Miami Beach, Florida 33154
2. President, T, S			
Director	Sumaia Labaki Raia	10155 Collins Avenue #301	Miami Beach, Florida 33154
Vice President			
Vice President	Virginia Hannud Lakabi	10155 Collins Avenue #301	Miami Beach, Florida 33154

REINSTATEMENT

800002429178--5
-02/12/98--01079--018
****900.00 ****900.00

8. Name and Address of Current Registered Agent

**Pegiro, Inc.
2880 S.W. 58th Ave.
Miami, FL 33155**

9. Name and Address of New Registered Agent

Name
National Registered Agents, Inc.
Street Address (P.O. Box Number is Not Acceptable)
701 Brickell Avenue
Suite, Apt. #, Etc.
Suite 1800
City
Miami
State
FL
Zip Code
33131

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0503, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date **2/6/98**

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)(j), 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

Date **2/6/98**

305-865-5104
Daytime Phone #

CR2E040 (1/96)