

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

AND FILED

APPLICATION FOR REINSTATEMENT



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

96 OCT 30 AM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000016119
1. Corporation Name
REGAL TRADE CONSULTANTS CORPORATION

000001997270--2
-11/06/96--01025--007
****375.00 ****375.00

Principal Place of Business Mailing Address
**1177 Kane Concourse, #101
Bay Harbor Islands, FL 33154**

DO NOT WRITE IN THIS SPACE

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 Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. #101	
City & State		City & State 1177 Kane Concourse	
Zip		Zip 33154	
Country		Country Dade	

4. Date Incorporated or Qualified To Do Business in Florida	
March 1, 1994	
5. FEI Number	Applied For
65-0632857	<input type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	

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
P/D	JAMES R. SABATINO	1177 Kane Concourse, #101	Bay Harbor Islands, FL 33154
S	GARRY M. GEERTSMA	10281 E. Bay Harbor Drive	Bay Harbor Islands, FL 33154

REINSTATEMENT 1996
10-30-96
A. Allen
10-30-96

8. Name and Address of Current Registered Agent
**JAMES R. SABATINO
1177 Kane Concourse, Suite 104
Bay Harbor Islands, FL 33154**

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City State Zip Code
FL

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 JAMES R. SABATINO REGISTERED AGENT MUST SIGN Date 10/25/96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: JAMES R. SABATINO SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date 10/25/96 305-865-8833 Daytime Phone #