

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION  
96-97 AR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

97 MAY -1 PM 12:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P94000017599

1. Corporation Name

Haemasin U.S.A., Inc.

Principal Place of Business

Mailing Address

250 International Parkway  
Suite 200  
Heathrow, FL 32746

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

4. Date Incorporated or Qualified  
To Do Business in Florida

3/1/94

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-3235845

Not Applicable

Zip

Country

Zip

Country

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
D	John Frankum	250 International Pkwy Suite 200	Heathrow, FL 32746
ST	Cynthia Faulk	250 International Pkwy Suite 200	Heathrow, FL 32746

500002169455--3  
-05/07/97--01064--006  
\*\*\*\*365.00 \*\*\*\*365.00

8/5/5

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Cynthia Faulk  
250 International Parkway  
Suite 200  
Heathrow, FL 32746

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

Cynthia Faulk

REGISTERED AGENT MUST SIGN

Date

4/29/97

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 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:

Cynthia Faulk Cynthia Faulk

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/29/97

(407)829-2000

Daytime Phone #

CR20040 (12/96)

**Haemasin U.S.A., Inc.**  
**250 International Parkway**  
**Suite 200**  
**Heathrow, Florida 32746**  
**(407) 829-2000**  
**(407) 829-2222 fax**

April 30, 1997

Mr. Sean Toner  
Senior Section Administrator  
Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314


RE: Document # P94000017599  
Haemasin U.S.A., Inc.

Dear Mr. Toner,

Thank you for the blank Application For Reinstatement. Enclosed you will find a check for \$365.00. It is our understanding that our status will now be current according to the Department of State, Division of Corporations guidelines. We had not received the 1996 form due to a change in our mailing address. Please note in your records our new address shown on the Application.

Thank you again for your prompt attention. Please call, should you have any questions.

Sincerely,

  
Cindy Faulk  
Secretary/Treasurer