


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>		<b>FLORIDA DEPARTMENT OF STATE</b>
		<b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

97 OCT 31 AM 8:41

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DOCUMENT # **P94000051601**

1. Corporation Name

**INTERCEDEX CORP.**

Principal Place of Business

10900 SW 78TH AVE  
MIAMI FL 33156

Mailing Address

10900 SW 78TH AVE  
MIAMI FL 33156



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

2. New Principal Office Address, If Applicable

11759 SW 117 PL.  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

SAME AS PRINCIPAL  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

07/13/1994

5. FEI Number

65-0503774

Applied For

Not Applicable

City & State

MIAMI FL

City & State

Zip

33186

Country

USA

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
DPT	DIAZ, ZAIDA	11759 SW 117 PL	MIAMI FL 33186
DVS	CEPEDA, FERNANDO	11759 SW 17 PL.	MIAMI FL 33186

400002336404--1  
-11/03/97--01107--016  
\*\*\*\*750.00 \*\*\*\*750.00

8. Name and Address of Current Registered Agent

DIAZ, ZAIDA  
11759 117 PLACE  
MIAMI FL 33186

9. Name and Address of New Registered Agent

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

*Zaida E. Diaz*

REGISTERED AGENT MUST SIGN

Date 10-27-97

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:

*Zaida E. Diaz*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-27-97 (305) 254-3260

Date

Daytime Phone #

CR2040 (8/97)