APPLICATION FOR Sandre-8- Martham Socretary of State DIVISION OF CORPORATIONS PREINSTATEMENT PAY 0000 878 S.G. Corporation Name LAVISON INVESTMENTS, Thc. Principal Place of Business APPROVED APPROVED 97 MAY - 2. MM 11: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA Maling Address 99 MAY - 2. MM 11: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA Maling Address 99 MAY - 2. MM 11: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA MILLAHASSEE, FLORIDA MILLAHAS
PREINSTATEMENT DOCUMENT # p940000 8785G 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA SECRETARY OF ST
Corporation Name AVISON INVESTHENTS, THC. Principal Place of Business 9905 N.W. 75 Ave. NIANI, FL 33108 MIANI, FL 33108 Il above addresses are incorrect in any way, line through incorrect information and enter correction below. There Principal Diffice Address, If Applicable S. New Melling Office Address. If Applicable S. New Melling Office Address. If Applicable S. New Melling Office Address. If Applicable Only & State Country Country Country Country Country Country Applied For GS - OS40263 Not Applied For Mod Applicable Country Name of Officers Applied For Mod Applicable Country Name of Officers Applied For Mod Applicable Country Count
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995 N.W. 7 Th Ave 995 N.W. 7 Th Ave. NI ANI , FL 33168 HIANI , FL 33168 If above addresses are incorrect in any way, line through incorrect information and enter correction below. Now Principal Office Address, If Applicable Suite, Apt. 9, etc. Suite, Apt. 9, etc. City & State Country 4. Date incorporated or Qualified to Do Business in Printing II / 94 5. FEI Number G.5 - 0.54 0.2 G.3 Not Applicable G.5 - 0.54 0.2 G.5 Not Time Foot Office Box Numbers) It ide(s) 2
N/ANI, FL 33/08 NIANI,
Il above addresses are incorrect in any way, line strrough 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 70 De Bushess in Piorida 11/94 Applicable Strike, Apt. e, etc. Suife, Apt. e, etc.
2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4. Do Businesses in Florida 11/94 5. FEI Number 6. So - 0.540.26.3 Applied For Not Applicable 5. FEI Number 6. Certificate Of Status Desired 7. Names and Street Addresses of Each Officer and/or Director 7. Names and Street Addresses of Each Officer and/or Director 8. Street Address of Each 1. On Not Use Post Office Box Numbers 9. Certificate Of Status Desired 1. Colo N 1. Street Address of Each 1. Colo N 1. Street Address of New Registered Agent 1. Colo N 1. Name 1. Colo N
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Title(s) 2 Name of Officers and/or Directors 3 Street Address of Each (Do NorThee Post Office and/or Directors) 4 CRy / State / Zp D JAVIEV J. Colon 3071 S.W. 27th Ave.#21 Coconvt Girove, FL 33/33 REINSTATEMENT 95-97 G. Clan B. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 5/2/97 B. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 6. Street Address (P.O. Box Number is Not Acceptable) 100 Auc. Suite, Apl. 4, Etc. Suite,
Title(s) 2 and/or Directors 3 (Do NOT Use Post Office Box Numbers) 4 City / State / Zp Davier 1. Colon 3071 S.W. 27th Ave.#21 Cocomit Grove, FL 33133 REINSTATEMENT 95-97
B. Name and Address of Current Registered Agent 8. Name and Address of Current Registered Agent Name CARCIA ESPINOSA, MIYARES + CO. Street Address (P.D. Box Number is Not Acceptable) Suite, Apl. 1, Etc. Suite # 230 Coval Gables FL 33134
B. Name and Address of Current Registered Agent 8. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name 8. Name and Address of New Registered Agent 8. Name 8. Name and Address of New Registered Agent 8. Name 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name 8. Name and Address of New Registered Agent 9. Name and Address of
Name CARCIA, ESPINOSA, MIYARES + Co., Street Address (P.O. Box Number is Not Acceptable) 100 ALNERIA Auc., Suite, Apt. #, Etc. Suite # 230 City Coral Gables FL 33134
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CARCIA, ESPINOSA, MIYARES + Co. Street Address (P.O. Box Number is Not Acceptable) 100 ALNERIA AVC. Suite, Apt. #, Etc. Suite # 230 City Coval Gables FL 33134
Suite # 230 City Coral Gables State Zip Code State 33134
Coval Gables State Zip Code FL 33134
legistered Agent Lengul The HIST SIGN Date 4/29/97 REGISTERIO AGENT MUST SIGN
1. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No
2 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 path.