

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

98 MAY -8 PM 1:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95 000016652

1. Corporation Name ARAL ENTERPRISES, INC.,

Principal Place of Business

Mailing Address

12306 S.W. 117th COURT
MIAMI, Florida

33186

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

2-27-95

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. FEI Number

65-0581039

Applied For

Not Applicable

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
<u>P</u>	<u>ARTHUR WAGNER</u>	<u>7825 ABERDEEN Lakes Drive</u>	<u>Boynton Beach, Florida 33437</u>
<u>S/T</u>	<u>ALAN SANDBERG</u>	<u>10 EL PASO COURT E. Northport, NY 11731</u>	<u>EAST, NORTHPORT, NY 11731</u>
			<u>000002517430--1</u>
			REINSTATEMENT <u>97-98</u>
			<u>A. Wagner</u> <u>5/8/98</u>

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ARTHUR WAGNER
7825 ABERDEEN LAKES DRIVE
BOYNTON BEACH, FLORIDA 33437

Name

N/A

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

N/A

Suite, Apt. #, Etc.

N/A

City

N/A

State

FL

Zip Code

N/A

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

Arthur Wagner
REGISTERED AGENT MUST SIGN

Date 5/7/98

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:

Arthur Wagner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/98
Date

Daytime Phone #



ACCOUNT NO. : 072100000032

REFERENCE : 811976 6179A

AUTHORIZATION : *Patricia Pizant*
COST LIMIT : \$ 758.75

ORDER DATE : May 8, 1998

ORDER TIME : 10:43 AM

ORDER NO. : 811976-005

CUSTOMER NO: 6179A

CUSTOMER: Mr. Lance B. Friedman
Weiss & Handler, P.a.
Suite 218 A
2255 Glades Road
Boca Raton, FL 33431-7383

DOMESTIC FILINGS

NAME: ARAL ENTERPRISES, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stacy L Earnest

EXAMINER'S INITIALS

G. Alan
5/8/98

RECEIVED
98 MAY -8 PM 12:12
DIVISION OF CORPORATION