

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

FILED

97 OCT 30 PM 2:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000032586

1. Corporation Name
DASTEM, INC.

Principal Place of Business Mailing Address
15854 SW 90TH COURT - 8400 S.W. 103 Ave. 15854 SW 90TH COURT 8400 S.W. 103 Ave.
MIAMI FL 33157 Miami, Fla. 33173 MIAMI FL 33157 Miami, Fla. 33173

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

2. New Principal Office Address, If Applicable 8400 S.W. 103rd Ave. Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable 8400 S.W. 103rd Ave. Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 04/24/1995	
City & State Miami, Fla.		City & State Miami, Fla.		5. FEI Number 65-0583202 Applied For Not Applicable	
Zip 33173	Country U.S.A.	Zip 33173	Country U.S.A.	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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	SROKA, STEFAN	15854 SW 90TH COURT 8400 S.W. 103rd Ave	MIAMI FL 33157- Miami, Fla. 33173
D	SZWAJKA-SROKA, MALGORZATA	15854 SW 90TH COURT 8400 A.W. 103rd Ave.	MIAMI FL Miami, Fla. 33173

REINSTATEMENT 97

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-11/03/97--01159--003
******758.75 ****758.75**

8. Name and Address of Current Registered Agent SROKA, STEFAN 15854 SW 90TH COURT MIAMI FL 33157		9. Name and Address of New Registered Agent Name SAME Street Address (P.O. Box Number is Not Acceptable) 8400 S.W. 103rd Ave. Suite, Apt. #, Etc. City Miami, State FL Zip Code 33173	
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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 Date **Oct. 27. 1997**
REGISTERED AGENT MUST SIGN

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: **Stefan Sroka** Date **Oct. 27, 1997**
SIGNATURE AND PRINTED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #