

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **P95000035530**

1. Corporation Name

BUREAU 2000 INTERNATIONAL, INC.

FILED

97 JAN 13 AM 11:45
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business

Mailing Address

~~% MERSHON, SAWYER, JOHNSTON, ET AL.~~
~~200 S. BISCAYNE BLVD., #4500~~

MIAMI FL 33131
3111 University Dr. #406
Coral Springs, FL 33065

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

~~% MERSHON, SAWYER, JOHNSTON, ET AL.~~
~~200 S. BISCAYNE BLVD., #4500~~

MIAMI FL 33131
3111 University Dr. #406
Coral Springs, FL 33065



REINSTATEMENT

2. New Principal Office Address, If Applicable

3111 University Drive

Suite, Apt. #, etc.

Suite 406

City & State

Coral Springs, FL

Zip

33065

Country

3. New Mailing Office Address, If Applicable

3111 University Drive

Suite, Apt. #, etc.

Suite 406

City & State

Coral Springs, FL

Zip

33065

Country

4. Date Incorporated or Qualified To Do Business in Florida

05/05/1995

5. FEI Number

65-0581236

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	PARISH, DAVID F	200 S. BISCAYNE BLVD., #4500	MIAMI FL 33131
P/S/T D	Ryder, David	3111 University Drive Suite 406	Coral Springs, FL 33065

500002059305--4
-01/15/97--01079--002
****375.00 ****375.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PARISH, DAVID F
% MERSHON, SAWYER, JOHNSTON, ET AL.,
200 S. BISCAYNE BLVD., #4500
MIAMI FL 33131

Name

Ryder, David

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

3111 University Drive, Suite 406

Suite, Apt. #, Etc.

City

Coral Springs,

State

FL

Zip Code

33065

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

David Ryder

REGISTERED AGENT MUST SIGN

Date

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David Ryder, President

(954) 753-6666

Date

Daytime Phone #