

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

10f2

98 NOV 20 AM 10:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000037967

1. Corporation Name

CLAECH, INC.

Principal Place of Business

15621 SW 43RD TERRACE  
MIAMI FL 33185

Mailing Address

15621 SW 43RD TERRACE  
MIAMI FL 33185

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

05/12/1995

5. FEI Number

65-0580064

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)

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
P	ECHEVERRIA, RODOLFO <i>Desease</i>	15621 SW 43RD TERRACE	MIAMI FL 33185
<i>VP Pres</i>	ECHEVERRIA, ALICIA	15621 SW 43RD TERRACE <i>407 Lincoln Rd #50</i>	<i>MIAMI FL</i> <i>Miami Beach FL 33139</i>
<i>VP</i>	<i>John C. Clavijo</i>	<i>407 Lincoln Rd #50</i>	<i>Miami Beach FL 33139</i>
			100002699471--4 -12/01/98--01083--007 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

ECHEVERRIA, RODOLFO  
15621 SW 43RD TERRACE  
MIAMI FL 33185

*(Desease)*

9. Name and Address of New Registered Agent

Name

*Alicia Echeverria*

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

*407 Lincoln Rd #50*

Suite, Apt. #, Etc.

City

*Miami Beach*

State

*FL*

Zip Code

*33139*

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

*[Signature]* NATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date *11-17-98*

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:

*[Signature]* NATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*11-17-98*

Date

*305-534-9292*

Daytime Phone #

CR25040 (9/98)

20f2

*Brito & Brito Accounting*

*407 Lincoln Road  
Suite 5-B  
Miami Beach, Florida 33139*

*Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314*

*November 18, 1998*

*Ref.: P95000037967*

*Dear Sir/Madam,*

*Please accept enclosed check in the amount of \$150.00 and application for reinstatement for Claeche, Inc.*

*Unfortunately, my clients' husband passed away last year and she moved so the original application was sent to an old address, therefore she never received it. I have made changes in her address so that in the future this never occurs.*

*If you have any further questions, please do not hesitate in contacting me at my office.*

*Sincerely,*



*George Brito  
Accountant*

*GLB/irp*

**Corporate Accounting and Business Development**

*Tel: (805) 584-9292 / Fax: (805) 584-7634*