

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
RESTATEMENT



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

DOCUMENT # P95000058782

1. Corporation Name

SUMMIT CONSULTING GROUP OF MIAMI, INC.

Principal Place of Business

100 S.E. 2ND STREET, SUITE 4650
MIAMI FL 33131

Mailing Address

100 S.E. 2ND STREET, SUITE 4650
MIAMI FL 33131

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

2. New Principal Office Address, If Applicable

3049 Mary St
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

3049 Mary St
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

07/31/1995

5. FEI Number

65-0590580

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33133

Country

USA

Zip

33133

Country

USA

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
P	SARDINAS, BENJAMIN A	3049 MARY ST	COCONUT GROVE FL 33133
S	SARDINAS, Zeida C	3049 Mary St	COCONUT GROVE FL 33133
			800002349888-6 -11/18/97--01014--008 ****550.00 ****550.00
			11-13-97

8. Name and Address of Current Registered Agent

MADORSKY, MARSHA G
2665 SOUTH BAYSHORE DRIVE, SUITE 603
MIAMI FL 33133

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/5/97
Date

(305) 460-6363
Daytime Phone #

CR20040 (8/97)

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Nationsbank Tower - Suite 4650
Miami, Florida 33131
<http://www.scginc.com>

**Summit Consulting
Group**

Voice 305.347.4010
800.230.0041
Fax 305.347.4011

November 5th, 1997

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

Re: Summit Consulting Group of Miami, Inc.
Document #P95000058782

To whom it may concern:

Please be advised that with reference to the above listed corporation, a corporation annual report was filed on August 5th 1997 with check #2756 also dated August 5th, 1997 in the amount of \$550.00. The Summit Consulting Group of Miami, Inc. check drawn on Barnett Bank has never cleared our bank.

As per my conversation with your office on November 5th, 1997 when I received an application for reinstatement form, I was told to forward this letter and a replacement check for \$550.00 to have the corporation updated.

Thank you for your prompt attention to this matter. If you should have any questions, please do not hesitate to contact me at (305) 460-6363.

Sincerely,


Zeida C. Sardiñas
Corporate Secretary