

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 SEP -9 AM 8:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000061845

1. Corporation Name

BALMOR, INC.

Principal Place of Business

2607 Collins Ave.  
Miami Beach, FL 33140

Mailing Address

2607 Collins Ave.  
Miami Beach, FL 33140

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

4. Date Incorporated or Qualified  
To Do Business in Florida

August 10, 1995

5. FEI Number

65-0602255

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 nonpro'it corporations must list at least 3 directors)

1. Title	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	RAMON ANTONIO CARVAJAL	136 S.W. 96th. Court	Miami, Florida 33174
S/T	VIVIAN HERNANDEZ	136 S.W. 96th. Court	Miami, Florida 33174

200002988082--8  
-09/15/99--01077--002  
\*\*\*\*908.75 \*\*\*\*908.75

8. Name and Address of Current Registered Agent

DEBORA HERNANDEZ  
136 S.W. 96th. Court  
Miami, FL 33174

9. Name and Address of New Registered Agent

Name  
VIVIAN HERNANDEZ  
Street Address (P.O. Box Number is Not Acceptable)  
136 S.W. 96th. Court  
Suite, Apt. #, Etc.  
City  
Miami  
State  
FL  
Zip Code  
33174

10. I, the undersigned, 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 7/30/99

11. This corporation owes 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 this 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 stated 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

7/30/99  
Date

(305) 538-2347  
Daytime Phone #

CR2001 (12/98)