

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

DOCUMENT # P95000062169

1. Corporation Name

ROAV ENTERPRISES, INC.

Principal Place of Business

1880 N.W. 20th Street
Miami, FL 33142

Mailing Address

c/o Rochell Green
19101 N.E. 36 Ct. Ste. 2506
Aventura, FL 33180

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

8-10-95

5. FEI Number

65-0601388

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	Rochell Green	19101 N.E. 36 Ct. Ste. 2506	Aventura, FL 33180

8. Name and Address of Current Registered Agent

Rochell Green
19101 N.E. 36 Ct. Ste. 2506
Aventura, FL 33180

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

3/9/98

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/9/98

Daytime Phone #

FILED

98 MAR 12 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-03/17/98--01032--003
***315.00 ***315.00

ROAV ENTERPRISES, INC.

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1880 N.W. 20th Street
Miami, Florida 33142
(305)548-1223

March 9, 1998.

Florida Department of State
Division of Corporations
Annual Report Section
P.O. Box 6327
Tallahassee, Fl. 32314

Re: ROAV ENTERPRISES, INC.
Ref Number: P95000062169

Dear Sir/Madam,


I would like to request an abatement of penalties for the reinstatement of ROAV ENTERPRISES, INC.

The mailing address that you had on file for my corporation was incorrect. As a result, I never received any of the renewal notices that were sent to me.

I am enclosing a copy of my corporate detail record which shows the error in the address.

Thanking you in advance for your attention to this matter, I remain,

Very Truly Yours,



Rochell Green