

96-97 APR
**APPLICATION
FOR
REINSTATEMENT**



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

APPROVED
AND
FILED
pg 10 ncl

97 JAN 28 AM 11:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **Pa5000082845**

1. Corporation Name
DOORCRAFT, INC.

Principal Place of Business Mailing Address
**18341 N.E. 4th. CT.
N.M.B., FL. 33179** **18341 N.E. 4th. CT.
N.M.B., FL. 33179**

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		4. Date Incorporated or Qualified To Do Business in Florida 10/26/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-061-6071	
City & State		City & State		<input checked="" type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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	EDUARDO ZEGARRA	18341 N.E. 4th. CT. N.M.B., FL. 33179	NORTH MIAMI BEACH, FLORIDA 33179

500002072085--5
01/25/97-01032-013
****373.75 ****373.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

EDUARDO ZEGARRA
18341 N.E. 4th. CT.
NORTH MIAMI BCH., FL. 33179

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

E. Zegarra
REGISTERED AGENT MUST SIGN

Date

1-27-97

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

E. Zegarra
E. ZEGARRA, PRESIDENT

Date

1-27-97

Daytime Phone #

**305
6534447**

DOORCRAFT

January 27th, 1997

DEPARTMENT OF STATE
DIVISION OF CORPORATION
409 East Gaines St.
Tallahassee, Fl. 32399

ATTN: MR. SEAN TONER

Dear Mr. Toner:

This is to certify that, I, EDUARDO ZEGARRA, President of DOORCRAFT, INC., did not receive any documentation of 'Filing Annual Report' or anything relating to the Corporation.

I request if you can please waive the Reinstatement fee at this time.

I will appreciate your attention on this matter and I am sending you a Cashier's Check for the amount of \$373.75, which includes a Fee of \$200.00 for the year of 1996, and \$165.00 Fee for the year of 1997. Also \$8.75 Additional Fee for a Certificate of Status is included.

Cordially yours,



EDUARDO ZEGARRA,
President

/amp

PS. I am including our Federal Express Acct. No. 2070-9555-9 for your convenience. Please FEDEX as soon as possible. Thank you very much.-