

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **P95000084558**

1. Corporation Name

RODFIN SALES GROUP, INC.

Principal Place of Business

10701 NORTHWEST 14TH STREET, SUITE 207
FORT LAUDERDALE FL 33322

Mailing Address

10701 NORTHWEST 14TH STREET, SUITE 207
FORT LAUDERDALE FL 33322

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

11/03/1995

Suite, Apt. #, etc.

13863 N.W. 22nd COURT

Suite, Apt. #, etc.

13863 N.W. 22nd COURT

City & State

FOOT LAUDERDALE, FL

City & State

FOOT LAUDERDALE, FL

Zip

33323

Country

USA

Zip

33323

Country

USA

5. FEI Number

11/03/95 650618953

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

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
1	2	3	4
PSID	RODRIGUEZ, LUIS E	10701 NORTHWEST 14TH STREET, SUITE 207	FORT LAUDERDALE FL 33322
P	LEONARDO J. FINOL	13863 N.W. 22nd COURT	FORT LAUDERDALE, FL 33323
X	LUIS E. RODRIGUEZ	13863 N.W. 22nd COURT	FORT LAUDERDALE, FL 33323
X	ANGELA C. RODRIGUEZ	13863 N.W. 22nd COURT	FORT LAUDERDALE, FL 33323
			700002014537-4
			-11/26/96--01111--004
			****150.00 ****150.00
			11-22-96

8. Name and Address of Current Registered Agent

THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name

LUIS E. RODRIGUEZ

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

13863 N.W. 22nd COURT

Suite, Apt. #, Etc.

700002014537-4

City

FORT LAUDERDALE

****225.00

FL

33323

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 REQUIRED

Date

11-18-96

REGISTERED AGENT MUST SIGN

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

11/18/96 (954) 851-9693

Date

Daytime Phone