

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION  
REINSTATEMENT



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 NOV 13 PM 5:34

DOCUMENT #

1. Corporation Name

MAGNETICS INTERNATIONAL INC.

P95000091112

2. Principal Office Address

7525 W. 20TH AVE.

Suite, Apt. #, etc.

3. Mailing Office Address

7525 W. 20TH AVE.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33014

Country

USA

Zip

33014

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

11/30/95

5. FEI Number

65-0627156

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ANITA MEHLER

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

10205 COLLINS AVE

Suite, Apt. #, Etc.

1406

600003487406-9

-12/05/00-01047-009

\*\*\*\*150.00 \*\*\*\*150.00

City

BAL HARBOUR

State

FL

Zip Code

33154

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

Anita Mehler

REGISTERED AGENT MUST SIGN

Date 11/08/00

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	ANITA MEHLER	10205 COLLINS AVE # 1406	BAL HARBOUR, FL 33154

10. 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:

Anita Mehler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/08/00

Date

305-825-6527

Daytime Phone #

CR2E081 (9/99)

# Magnetics



P95000091112

7525 W. 20<sup>TH</sup> Avenue  
Miami, Florida 33014

USA

Phone 305 825 6527

Fax 305 825 6122

Email: [Lyonstar@bellsouth.net](mailto:Lyonstar@bellsouth.net)  
[http:// www.magneticscellular.com](http://www.magneticscellular.com)

Wednesday, November 8, 2000

Division Of Corporations  
P.O.B. 6327  
Tallahassee, FL 33014  
To Whom It May Concern:

RE: Waiver of \$750.00 Reinstatement Fee for Magnetics International Inc.

Pursuant to my conversation yesterday with a member of your staff, and as per the instructions I received during that conversation, I am enclosing a check for \$150.00, and herby requesting that you grant Magnetics International a 1-time waiver of the \$750.00 reinstatement fee for the following reasons.

Since the beginning of its creation, Magnetics International has always made sure that all City, State, and Federal forms, permits and licenses have always been paid and applied for in a timely fashion. When we moved from our original location, we informed everyone in our computer banks about our new address. We never received your notices, this despite the fact that we had informed the Post Office of our move.

Again, I ask you to please grant us this 1 time waiver of the \$750.00 reinstatement fee in light of the fact that we never received your notices.

Kind Regards

Bobby Mehler  
General Manager