

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000096763

1. Corporation Name

Bionne, Inc.

FILED
08 OCT 15 AM 10:41
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA
300134970673
10/22/08--01034--005 **115.00
300134970673
08/26/08--01028--005 **150.00
08/26/08--01028--003 **35.00

2. Principal Office Address - No P.O. Box #

9400 Old Cutler Lane

Suite, Apt. #, etc.

City & State

Coral Gables, FL

Zip

33156

Country

USA

3. Mailing Office Address

c/o Frederick J. Wilson III, Esq.

Suite, Apt. #, etc.

4951 SW 80 Street

City & State

Miami, FL

Zip

33143

Country

USA

REINSTATEMENT 07-08

**4. Date Incorporated or Qualified
To Do Business in Florida** 12/21/95

5. FEI Number
650682038

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

Frederick J. Wilson III, Esq.

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

4951 SW 80 Street

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33143

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

REGISTERED AGENT MUST SIGN

Date

8/24/08

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
DP	Jorge L. Del Rosal	9400 Old Cutler Lane	Miami, FL 33156
DP	Zoila C. Del Rosal	9400 Old Cutler Lane	Miami, FL 33156
DTS	Jorge Del Rosal, Sr.	9400 Old Cutler Lane	Miami, FL 33156
DP	Virginia Del Rosal Cabrera	9400 Old Cutler Lane	Miami, FL 33156
DP	Elena Del Rosal Wilson	9400 Old Cutler Lane	Miami, FL 33156

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 contained in Chapter 119, 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

President

8/24/08

Date

305 662-3785

Daytime Phone #