PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

(1)

APPLICATION FOR REINSTATEMENT

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

FILED
97 NOV 12 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000008377**

1. Corporation Name

D.Z. INVESTMENTS INC.

Principal Place of Business	Mailing Address
16384 N.W. 20TH STREET PEMBROKE PINES FL 33028	16384 N.W. 20TH STREET PEMBROKE PINES FL 33028

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
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business In Florida: 01/25/1996

5. FEI Number: 65-0635244 ☐ 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
D	TORRE, MIGUEL S	% 16384 N.W. 20TH ST.	PEMBROKE PINES FL 33028
V	RAPHAEL ALEMAN	14300 LK. CRESENT PLACE	Miami LAKES, FL. 33014

200002346942--0
-11/13/97--01092--026
****165.00 ****165.00

11/12/97

8. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES, INC.
4521 PGA BLVD.
SUITE 211
PALM BEACH GARDENS FL 33418

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

CR2E040 (8/97)

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 _____ Date _____

REGISTERED AGENT MUST SIGN

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: M. TORRE M. 11/5/97 (954) 441-1700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(2)

November 5, 1997

DIVISION OF CORPORATIONS
ANNUAL REPORT/REINSTATEMENT SECTION
P.O. BOX 6327
TALLAHASSEE, FLORIDA 32314-6327

To whom it may concern,

The name of my corporation is D.Z. Investments, Inc, located in Pembroke Pines, Florida. The reason for this letter, is to ask for the **REINSTATEMENT FEE** to be waived. If you review my file you notice that the State of Florida and I have had correspondence several times. The last time was in July 1997, this is when I sent in the final documentation with a check for $165.00. I thought that it would get processed like a regular corporation. Come to find out that I was being dissolved, because State of Florida never received my final paperwork from July 1997.

Please allow me to continue with D.Z. Investments, Inc., and waive the REINSTATEMENT FEE.

Thank You for your assistance,

Miguel S. Torre