

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 NOV 20 AM 9:10

DOCUMENT # P96000011845

1. Corporation Name

CRAJO DESIGNS, INC.

Principal Place of Business

6333 BAY CLUB DRIVE
FORT LAUDERDALE FL 33308

Mailing Address

6333 BAY CLUB DRIVE
FORT LAUDERDALE FL 33308

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/07/1996

5. FEI Number

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
PTD	MONDO, CRAIG J	6333 BAY CLUB DRIVE	FORT LAUDERDALE FL 33308
VSD	MONDO, CAROL M	6333 BAY CLUB DRIVE	FORT LAUDERDALE FL 33308

100002354121--1
-11/21/97--01070--016
****165.00 ****165.00

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

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

REGISTERED AGENT MUST SIGN

Date

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oct. 24, 1997

Date

Daytime Phone #

CR2E040 (8/97)

October 24, 1997

Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314-6327

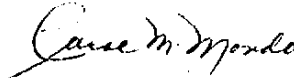
Dear Secretary of State:

Although we incorporated Crajo Designs in 1996, my son and I have not done any business up to this date. We hope to begin in the early part of 1998. This is a product development company and will take a long time to get started.

The business address that we set up is a part time residence, until we can afford office warehouse space. I never received the notice from the State regarding annual report due. We shall comply with future filing of annual reports and hope that you accept the fee of \$165.00 as stated in phone conversation with the Division of Corporations this morning, to reinstate our company.

I thank you for your help and consideration.

Very truly yours,



Carol M. Mondo
Vice President