

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

97402
APPLICATION FOR
REINSTATEMENT



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

1997 DEC -2 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000012999**

1. Corporation Name
BIZA, CORP.

Principal Place of Business
**1500 SAN REMO AVE. SUITE 125
CORAL GABLES FL 33146**

Mailing Address
**1500 SAN REMO AVE. SUITE 125
CORAL GABLES FL 33146**

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

02/12/1996

Suite, Apt. #, etc.
720 So. Federal Highway

Suite, Apt. #, etc.
720 So. Federal Highway

5. FEI Number

59-2224262

Applied For

Not Applicable

City & State
Hallandale, FL 33009

City & State
Hallandale, FL 33009

Zip Country
33009

Zip Country
33009

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	FOX, SPENCER	1500 SAN REMO AVE, SUITE 125	CORAL GABLES FL 33146
D/P	Mutchnik, Ralph	720 So. Federal Highway	Hallandale, FL 33009

300002364403--9
-12/05/97--01082--012
******165.00 ****165.00**

WSP
12/2/97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FOX, SPENCER
1500 SAN REMO AVE, SUITE 125
CORAL GABLES FL 33146

Name
Spencer Fox, Esq., c/o Keith Mack LLP
Street Address (P.O. Box Number is Not Acceptable)

200 South Biscayne Blvd.
Suite, Apt. #, Etc.
20th Floor

City State Zip Code
Miami FL 33131

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]

REGISTERED AGENT MUST SIGN

Date **11/6/97**

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

[Signature]

Date

11/10/97

Daytime Phone #

CR20040 (8/97)



Present Realty, Inc.

November 10, 1997

Stacy Prathen
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

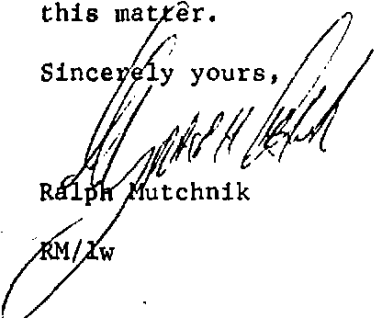
Dear Ms. Prathen:

As per our telephone conversation today, enclosed please find our corrected Application for Reinstatement, for Biza and Lchem Corporation, and two checks in the amount of \$165.00.

As I explained to you on the telephone, we had never received these documents because they were sent to our attorney, who was moving to new offices at the time, and somehow these papers never reached us.

We have corrected the address on the form, so hopefully we will not experience this confusion again. I can't thank you enough for your help in resolving this matter.

Sincerely yours,



Ralph Mutchnik

RM/lw