

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

99 JUN -7 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PAU000037153

1. Corporation Name
VISTA CONVENTION SERVICES - SOUTH, INC.

Principal Place of Business Mailing Address
300 ARTHUR GODFREY ROAD - SUITE 202
MIAMI BEACH, FLORIDA 33140

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 N/A
City & State
Zip Country

3. New Mailing Office Address, If Applicable
Suite, Apt #, etc N/A
City & State
Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

5-15-96

5. FEI Number
65-0665386

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
Pres.	Edward J King	6804 Delilah Road	Pleasantville NJ 08232
V-Pres.	Raymond Nelson	6804 Delilah Road	Pleasantville NJ 08232
Secy	Darlene Yard	6804 Delilah Road	Pleasantville NJ 08232

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***1050.00 ***1050.00

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8. Name and Address of Current Registered Agent

Charles Garris, Esq.
817 Beach Land Boulevard
Vero Beach, Florida 32963

9. Name and Address of New Registered Agent

Name Harry Dupuis
Street Address (P.O. Box Number is Not Acceptable)
300 Arthur Godfrey Road
Suite, Apt #, Etc Suite 202
City Miami Beach
State FL Zip Code 33140

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 5-8-99

11. This corporation owes 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)(f), 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: Edward King
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-2-99 608-485-2421
Date Daytime Phone #

CR2E98112-98