

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

99 OCT -4 PM 4:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000056281

1. Corporation Name

KARISMA ENTERPRISES, INC.

Principal Place of Business

7455 West Flagler Street
Miami, Florida 33144

Mailing Address

SAME

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

7/02/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0685783

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/D/S	RICHARD L. JENKINS	7455 W. Flagler Street	Miami, Florida 33144
VP	LIONEL BARNET	9100 S. Dadeland Blvd. #404	Miami, Florida 33156
			000003024400--8 -10/25/99--01130--015 ***908.75 ***908.75

8. Name and Address of Current Registered Agent

JEFFREY MALIN
7455 W. Flagler Street
Miami, Florida 33144

9. Name and Address of New Registered Agent

Name
LIONEL BARNET, ESQUIRE
Street Address (P.O. Box Number is Not Acceptable)
9100 South Dadeland Boulevard #404
Suite, Apt. #, Etc.
City
Miami
State
FL
Zip Code
33156

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 September 30, 1999

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)(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]

Lionel Barnett, VP 9/30/99 (305) 670-7887

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (12/98)