

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

98 JUL 21 PM 2:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000056383

1. Corporation Name

AMERICAN AIRPORT SERVICES, INC.

Principal Place of Business

Mailing Address

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

2. New Principal Office Address, If Applicable

800 BRICKELL AVE.

Suite, Apt. #, etc.

1109

City & State

MIAMI, FLORIDA

Zip

33131

Country

MIAMI DADE

3. New Mailing Office Address, If Applicable

800 BRICKELL AVE.

Suite, Apt. #, etc.

1109

City & State

MIAMI, FLORIDA

Zip

33131

Country

MIAMI DADE

4. Date Incorporated or Qualified
To Do Business in Florida

JULY 1, 1996

5. FEI Number

65-0691568

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
1	2	3	4
PRES.	GERALDO RODRIGUEZ	5151 DONATELLO ST	CORAL GABLES, FL 33146
V.PRES.	JOSEPH C. LORENZO	6048 SW 32nd ST.	MIAMI, FL. 33155
TR/SEC.	RICHARD C. LORENZO	617 PALERMO AVE,	CORAL GABLES, FL. 33134

REINSTATEMENT

7/15/98

800002596758-1
-07/23/98--01082--005
****900.00 ****900.00

8. Name and Address of Current Registered Agent

THOMAS R. SPENCER, JR.
801 BRICKELL AVE. SUITE 1901
MIAMI, FLORIDA 33131

9. Name and Address of New Registered Agent

Name

RICHARD C. LORENZO

Street Address (P.O. Box Number is Not Acceptable)

800 BRICKELL AVE. SUITE 1109

Suite, Apt. #, Etc.

1109

City

MIAMI

State

FL

Zip Code

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

REGISTERED AGENT MUST SIGN

Date

7/15/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐

No ☒

Not Liablc
Inactive

(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

GERALDO RODRIGUEZ

7/15/98

Date

(305)381-8541

Daytime Phone #