

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 APR 25 PM 2:39

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P96000097810

1. Corporation Name

DELEV, INC,

2. Principal Office Address

6115 West 26 COURT

Suite, Apt. #, etc.

3. Mailing Office Address

6115 West 26 COURT

Suite, Apt. #, etc.

City & State

Hialeah FLA

City & State

Hialeah FLA

Zip

33016

Country

USA

Zip

33016

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11-27-96

5. FEI Number

650713280

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Emilio U. Battiga

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

6115 West 26 COURT

Suite, Apt. #, Etc.

City

Hialeah

300004015423

-04/25/01 -01084-043

***1323.75 ***1323.75

300004015423

-04/18/01 -01032-024

*****35.00 *****35.00

State
FL

Zip Code

33016

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Emilio U. Battiga

REGISTERED AGENT MUST SIGN

Date 04-24-01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles

Name of
Officers and/or Directors

Street Address of Each
Officer and/or Director

City / State / Zip

P	TERESA GARCIA	6115 West 26 COURT	Hialeah FLA 33016
SEC.	EMILIO U. BATTIGA	6115 West 26 th COURT	Hialeah FLA 33016

REINSTATEMENT 97-01

10. 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:

Emilio U. Battiga

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-24-01

Date

Daytime Phone #

(305)608-6394