

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000100630

1. Corporation Name

AKYLOS CORPORATION

Principal Place of Business

1275 SW 46TH AVE #2406
POMPANO BEACH FL 33069

Mailing Address

1275 SW 46TH AVE #2406
POMPANO BEACH FL 33069

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

4821 COCONUT CREEK PKWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 114

City & State

City & State

COCONUT CREEK, FL

Zip

Country

Zip

Country

33063

USA

REINSTATEMENT

98

4. Date Incorporated or Qualified To Do Business in Florida

01/01/1997

5. FEI Number

65-0715228

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)

| 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 |
|---------------|--|--|-------------------------|
| P | LUIS E DEL AGUILA JR | 1275 SW 46 AVE #2406 | POMPANO BEACH, FL 33069 |
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3000002725639-6

-12/23/98-01090-005

****758.75 ****758.75

12/14/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

AGUILA, LUIS D
1275 SW 46TH AVE #2406
POMPANO BEACH FL 33069

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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]

NOT REQUIRED

REGISTERED AGENT MUST SIGN

Date 12-14-98

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]

NOT REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUIS E DEL AGUILA JR

12-14-98

Date

954/917-3220

Daytime Phone #

CR2E040 (9/96)