

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 OCT 19 PM 5:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000009085

1. Corporation Name

IMAGE AUTO, INC.

Principal Place of Business

1609 W MCNAB RD
POMPANO BEACH FL 33069

Mailing Address

1609 W MCNAB RD
POMPANO BEACH FL 33069



2001 U.B.R.

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

2. New Principal Office Address, If Applicable

9528 N.W. 52 CT
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

9528 N.W. 52 CT
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

01/29/1997

5. FEI Number

65-0765438

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	4 City / State / Zip
P/O S/D	LANZI, DAVID	1609 W MCNAB RD 9528 NW 52 CT	POMPANO BEACH FL 33069 Coral Springs FL 33076

700004685877-8
-11/16/01--01084-001
****158.75 ****158.75

19 @ 158.75

8. Name and Address of Current R

9. Name and Address of New Registered Agent

LANZI, DAVID

1609 W MCNAB RD
POMPANO BEACH FL 33069
9528 N.W. 52 CT
Coral Springs FL
33076

Name

DAVID LANZI

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

9528 N.W. 52 CT
Suite, Apt. #, Etc.

City

Coral Springs

State

FL

Zip Code

33076

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

10/16/01

11. 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

Date

Daytime Phone #

DAVID LANZI

10/16/01

954
528-4202

CREW40 (801)

October 16, 2001

Department of State
Divisions of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Re: Image Auto, Inc.

Please let this letter serve as notice that Image Auto, Inc. has never received any previous 2001 Uniform Business Report renewals.

Image Auto, Inc. just received an application for reinstatement; this was the only notice that was received this year.

Enclosed is a check #2749 in the amount of \$158.75. \$150.00 for the 2001 corporate renewal and \$8.75 for a Certificate of Status.

Please forward the Certificate of Status to Image Auto, Inc.

.. 9528 N.W. 52 CT, Coral Springs, FL 33076

If there are any questions regarding this matter, please contact me directly at (954) 575-0094.

Sincerely,



DAVID LANZI
President of Image Auto, Inc.

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