

APPLICATION
FOR REINSTATEMENT



FILED

99 SEP 30 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000017632

1. Corporation Name

ASA ENTERPRISES, INC.

Principal Place of Business
8323 NW 64 STREET
MIAMI, FL 33166

Mailing Address
8323 NW 64 STREET
MIAMI, FL 33166

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

REINSTATEMENT

02/25/95

5. FBI Number **65-0741546**

Applied For	
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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)

[illegible]

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ANTONIO SERGIO BAYMA AGUIAR
8323 NW 64 STREET
MIAMI, FL 33166

Name _____

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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 **07/27/99**

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/27/99
Date

Date

(305) 994-2100

Daytime Phone #

KE

CR2E040 (1/98)