

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000020829

1. Corporation Name

A & C Investments, Inc.

99 MAY 24 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

c/o Julio E. Manguart
1428 Brickell Avenue
Main Floor
Miami, FL 33131

Mailing Address

c/o Julio E. Manguart
1428 Brickell Avenue
Main Floor
Miami, FL 33131

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

3/6/97

5. FEI Number

☒ 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
D	Miguel Goncalves Pacheco e Oliveira	1428 Brickell Avenue Main Floor	Miami, FL 33131

200002884412-2

8. Name and Address of Current Registered Agent

Julio E. Manguart
1428 Brickell Avenue
Main Floor
Miami, FL 33131

9. Name and Address of New Registered Agent

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

Julio E. Manguart

REGISTERED AGENT MUST SIGN

Date 5/21/99

11. This corporation owes 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

Miguel Goncalves Pacheco e Oliveira 5/21/99 (305)372-8889
Director Date Daytime Phone #

CR2001 (2/98)



ACCOUNT NO. : 072100000032

REFERENCE : 250719 169526A

AUTHORIZATION :

COST LIMIT : \$ 908.75

ORDER DATE : May 24, 1999

ORDER TIME : 12:45 PM

ORDER NO. : 250719-005

CUSTOMER NO: 169526A

CUSTOMER: Amy Valiente, Legal Asst
Manguart & Associates, P.a.
Main Floor
1428 Brickell Avenue
Miami, FL 33131

DOMESTIC FILINGS

NAME: A & C INVESTMENTS, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS _____

RECEIVED
99 MAY 24 PM 1:44