

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

200004418112--9  
-06/13/01-01078--004  
\*\*\*908.75 \*\*\*908.75

FILED

01 JUN -5 PM 12:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000066869

1. Corporation Name

SANRIC FLORIDA, INC.

Principal Place of Business

Mailing Address

8000 BROWARD MALL. #222  
PLANTATION FL 33388

8000 BROWARD MALL. #222  
PLANTATION FL 33388

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

08/01/1997

5. FEI Number

65-0771682

☒ 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	CHEN, JOSEPH I	8000 BROWARD MALL. #222	PLANTATION FL 33388
-D	CHEN, ERIC I	8000 BROWARD MALL. #222	PLANTATION FL 33388

REINSTATEMENT 2000-01

8. Name and Address of Current Registered Agent

SCHWARTZ, JODI W  
6565 TAFT ST., STE. 200  
HOLLYWOOD FL 33024

9. Name and Address of New Registered Agent

Name Joseph Chen  
Street Address (P.O. Box Number is Not Acceptable)  
8000 W. BROWARD BLVD #222  
Suite, Apt. #, Etc.  
PLANTATION, FL 33388  
City  
State FL Zip Code 33388

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

JOSEPH CHEN  
REGISTERED AGENT MUST SIGN

Date 5/07/01

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:

JOSEPH CHEN  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/07/01  
Date

(954) 475-8811  
Daytime Phone #

CR2E040 (8/00)