

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 97000104967

1. Corporation Name

LAVA ROCKS INC
~~W 1200000 3391~~

2. Principal Office Address - No P.O. Box #

3163 NW 93 ST

Suite, Apt. #, etc

I

City & State

Miami Florida

Zip

33147

Country

FL

3. Mailing Office Address

2975 NW 102 ST

Suite, Apt. #, etc.

(2)

City & State

Miami

Zip

33147

Country

FL

7. Name and Address of Current Registered Agent

Name

Laveroux Matthew 3163 NW 93 ST
Street Address (P.O. Box Number is Not Acceptable) 33147

Suite, Apt. #, Etc

I

City

Miami

State

FL

Zip Code

33147

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Matthew Laveroux

REGISTERED AGENT MUST SIGN

Date 1/23/12

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President Owner And Directors	Laveroux Matthew	3163 NW 93 ST	Miami Florida 33147

REINSTATEMENT 06-12

10. E-mail Address: LAVA ROKK @ Gmail.com

(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Matthew Laveroux

MATTHEW LAVERAUX

Date

1/23/12

Daytime Phone #

12 FEB 20 PM 4:32

200218676252
01/21/12-01063-007-***1500.00.

REINSTATEMENT 06-12
CR2E081 (11/10)

4. Date Incorporated or Qualified
To Do Business in Florida 12/19/97

5. FEI Number

☐ Applied For ...
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

200218676252
02/20/12-01046-001-***158.75

FEB 10