

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

APPLICATION FOR REINSTATEMENT
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000014407

1. Corporation Name

ALTERNATIVE EYEWEAR, INC.

Principal Place of Business

3475 MYSTIC POINTE DRIVE #10
AVENTURA FL 33180

Mailing Address

3475 MYSTIC POINTE DRIVE #10
AVENTURA FL 33180

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

2. New Principal Office Address, If Applicable

3475 MYSTIC POINTE DR
Suite, Apt. #, etc.
#10

3. New Mailing Office Address, If Applicable

3475 MYSTIC POINTE DR
Suite, Apt. #, etc.
#10

City & State

AVENTURA FL

City & State

AVENTURA FL

Zip

33180

Country

U.S.A.

Zip

33180

Country

U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida

02/12/1998

5. FEI Number

65-0817757

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) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|----------|-----------------------------------|--|--------------------|
| 1 | 2 | 3 | 4 |
| PSID | KALICHMAN-ARTZY, ILANA | 3901 S OCEAN DR, #12-E | HOLLYWOOD FL 33010 |
| PSID | Kalichman - Artzy, Ilana | 3475 MYSTIC POINTE DR #10 | AVENTURA, FL 33180 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | LS |

8. Name and Address of Current Registered Agent

KALICHMAN-ARTZY, ILANA
3901 S OCEAN DR, #12-E
HOLLYWOOD FL 33010

9. Name and Address of New Registered Agent

Name
KALICHMAN - ARTZY, ILANA
Street Address (P.O. Box Number is Not Acceptable)
3475 MYSTIC POINTE DR
Suite, Apt. #, Etc.
#10
City
AVENTURA
State
FL
Zip Code
33180

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 10 12 99

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

[Signature]

Date

Daytime Phone #

10-12-99 (305) 608-7018



7/13/99 90011/034 \$150.00

FILED

99 OCT 21 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E040 (8/99)

9

October 12, 1999

To: Division of Corporations
Re: Annual Report/ Reinstatement Section Application
From: Alternative Eyewear, Inc.
3475 Mystic Pointe Drive #10
Aventura, Fl. 33180
(305) 932-6100
(305) 389-7788
Document Number: P98000014407

To whom it may concern,

On or about July 3, 1999 I received a notice stating that I have failed to file a 1999 annual report and pay the 1999 annual fee. On or about that day, I spoke to a representative from the division of corporations and explained that due to the recent relocation I did not receive the proper documents. I was then informed to immediately forward a check in the amount of one hundred and fifty dollars (\$150.00), which you will find is enclosed and cashed by the Department of State on July 19, 1999. I was also informed, that such payment would reinstate any and all my obligations on behalf of Alternative Eyewear, Inc. and no further action is need for the 1999 year.

On or about October 13, 1999 I received a "Certificate of Administrative Dissolution or Revocation." As per the consequences, I once again spoke to a representative in the Division of the Corporations who has informed me to simply write this letter, explain the situation, and fill out the Reinstatement form.

If you shall please note, this is a fairly new Corporation and various issues do need to be resolved. I will be forwarding this letter along with the "Application for Reinstatement," as I was instructed. Should there be any other discrepancies or uncertainties please contact me at the above address or telephone number.

Thank you and I trust that this matter will be resolved as soon as possible.



Ilana Kalichman-Artzy