

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # P98000026883

1. Corporation Name

CADA INTERNATIONAL, CORP.

FILED
00 JUL 25 AM 11:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

2. Principal Office Address

3943 S.W. 58 CT.

3. Mailing Office Address

3943 S.W. 58 CT.

Suite, Apt. #, etc.

MIAMI FL 33155

Suite, Apt. #, etc.

REINSTATEMENT

9100

4. Date Incorporated or Qualified
To Do Business in Florida

3/19/1998

5. FEI Number

65-0822104

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$9.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

William Y. Sayac, Jr.

10000334294

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

3131 Ponce de Leon Blvd.

-08/02/00--01002--001

***908.75 ***908.75

Suite, Apt. #, Etc.

Suite 430

City

CORAL GABLES

State

FL

Zip Code

33134

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

William Y. Sayac, Jr.

REGISTERED AGENT MUST SIGN

Date 24 JUL '00

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
DIR. PRES.	Peter Benitez	3943 S.W. 58 CT	MIAMI FL 33155
Dir. V.P.	CARLOS ORTEGA	3943 S.W. 58 CT	MIAMI FL 33155
Dir. Sec.	Rosa Benitez	3943 S.W. 58 CT	MIAMI FL 33155
Dir. TREAS.	Pedro A. Benitez	3943 S.W. 58 CT	MIAMI FL 33155

10. 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:

Rosa Benitez, Dir. Sec. *Rosa Benitez* 24 JUL '00 (305) 778-2218

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

KE