

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *kg 10x8*

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
99 000
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS *UBR*

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 27 PM 3:47

DOCUMENT # P98000027543

1. Corporation Name

BANGKOK SPA INCORPORATED

Principal Place of Business

4730 OKEECHOBEE BOULEVARD
WEST PALM BEACH FL 33417

Mailing Address

4730 OKEECHOBEE BOULEVARD
WEST PALM BEACH FL 33417



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

4. Date Incorporated or Qualified
To Do Business in Florida

03/19/1998

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	4 City / State / Zip
D	CHERRY, SUE TOK	4730 OKEECHOBEE BOULEVARD	WEST PALM BEACH FL 33417
P.D.	MAL SUK KIM	4730 OKEECHOBEE BLVD	WEST PALM BEACH FL 33417
P.D.	MYUNG JA BELLINI	4730 OKEECHOBEE BLVD	WEST PALM BEACH FL 33417
			500003196095--3
			-04/04/00--01103--002
			***300.00 ***300.00

8. Name and Address of Current Registered Agent

CHERRY, SUE TOK
4730 OKEECHOBEE BOULEVARD
WEST PALM BEACH FL 33417

9. Name and Address of New Registered Agent

Name
KIM, MAL SUK
Street Address (P.O. Box Number is Not Acceptable)
4730 OKEECHOBEE BLVD,
Suite, Apt. #, Etc.
City
WEST PALM BEACH
State
FL
Zip Code
33417

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

3/24/00

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.

AD

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/24/00

Daytime Phone #

561-471-7161

JONG H. LEE, CPA, PA

3600 S. STATE ROAD 7 • SUITE 230 • MIRAMAR • FL 33023
TEL (954) 967-0001 • FAX (954) 967-3112

March 24, 2000

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Attachment

DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

Re: Request for reinstatement
Document #: P98000027543

Dear sir or madam,

This is in request for a reinstatement of the above referenced corporation. The Corporation did not receive the annual report in 1999 that caused the corporation being dissolved. I have enclosed \$300.00 (fee for 1999 and 2000) along with reinstatement application.

The previous shareholder of the corporation received the annual report renewal notice for 1999 but did not forward the notice to us. The corporation learned of this when new shareholder had a discussion with previous shareholder on unrelated matter recently. Please update your record as the information appears on the reinstatement application and abate any penalty if there is. Contact us if you have any questions.

Sincerely,



Jong H. Lee, CPA

Cc: Bangkok Spa, Inc.

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Pg 1 of 2

PROFIT
CORPORATION
ANNUAL REPORT
1999-00



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR 27 PM 3:58

DOCUMENT # P98000085292

1. Corporation Name

EL HABITO, INC.

Principal Place of Business

1111 BISCAYNE BLVD.
#1552
MIAMI, FLORIDA 33181

Mailing Address

1111 BISCAYNE BLVD.,
#1552
MIAMI, FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

OCTOBER 5, 1998

4. FEI Number

65-0869244

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

LAURIE S. WHITTAKER
1065 NE 125TH STREET, SUITE 300
NORTH MIAMI, FL 33161

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT/DIR. ☐ DELETE
NAME ELIZABETH SANCHEZ
STREET ADDRESS 1111 BISCAYNE BLVD., #1552
CITY-ST-ZIP MIAMI, FL 33181

TITLE SECRETARY/DIR. ☐ DELETE
NAME MORELLA SALAZAR
STREET ADDRESS 1111 BISCAYNE BLVD., #1552
CITY-ST-ZIP MIAMI, FL 33181

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

☐ Change

☐ Addition

AD

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elizabeth Sanchez

EL HABITO, INC.

Pg 2
Attachment

March 22, 2000

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE, FLORIDA 32314

To Whom It May Concern:

I would like to take this opportunity to explain the reason for the delay in the filing of my annual report for EL HABITO, INC.

As of the date of this letter, I have not received by mail my form for filing the annual report. I have spoken with a representative of the State Department and he instructed me to send in two report filings as to bring our corporate status current.

Please accept the enclosed reports along with a check for \$300.00 as our filing fees and reinstate EL HABITO, INC., as a Florida Corporation, with the assurances that I will comply with all future regulations as required by the Division of Corporations for the State of Florida.

I would sincerely appreciate any assistance that you could supply in resolving this matter. Please feel free to contact me if I may be of further assistance.

Sincerely,



ELIZABETH SANCHEZ
PRESIDENT, EL HABITO, INC.