

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # P98000027580

1. Corporation Name

STREAM COMPUTER SERVICES, INC.

Principal Place of Business

3288 W. 74 ST.  
HIALEAH FL 33018

Mailing Address

3288 W. 74 ST.  
HIALEAH FL 33018



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

3/26/99 90024 034 150.00

4. Date Incorporated or Qualified  
To Do Business in Florida

03/23/1998

5. FEI Number

650840863

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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Jose Vilasuso	3288 W 74 ST HIA, FL. 33018	
S	Secretary Marcela Vilasuso	same as above	

8. Name and Address of Current Registered Agent

VILASUSO, JOSE  
3288 W. 74 ST.  
HIALEAH FL 33018

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

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

*Jose Vilasuso* REQUIRED  
REGISTERED AGENT MUST SIGN

Date 10-13-99

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

Jose Vilasuso

10-13-99

Date

205-

819-9509

Daytime Phone #

**Stream Computer Services, Inc.**  
**3288 W 74 St. Hialeah, FL 33018**  
**Phone/Fax 305 819-9509**

October 13, 1999

To Whom It May Concern:

I received a Notice of Dissolution in the mail today and I called the Florida Dept of State to ask why this had happened. The customer service rep asked me if I had received a correction letter back in April or May and I said no, I didn't. She told me to write a letter stating what had happened and this is what I am now doing. I sent out the company original company report back in April along a check for \$150.00. I have in my possession a copy of the cancelled check. Therefore I know I sent it.


**FEI/SSN: 650840863**

**COMPANY: Stream Computer Services, Inc**

**DOCUMENT#: P98000027580**

I appreciate your prompt attention to this matter.

Sincerely,

  
Jose Vilasuso  
President