

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
K. Michael Harris  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

1

DOCUMENT # P98000039514

1. Corporation Name

A-N-C IMPORT EXPORT INC.

00 JAN 10 AM 9:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

7441 NORTH MIAMI AVE  
MIAMI FL 33150

Mailing Address

7441 NORTH MIAMI AVE  
MIAMI FL 33150

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

04/29/1998

5. FEI Number

65-0869055

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
V	FRACOIS, RENE <del>yes</del>	865 NE 127TH ST <del>YES</del>	MIAMI FL 33161
S	ANDRE, DENISE	330 NE 121ST TERR	MIAMI FL 33161
P	CARL, ANDRE	330 NE 121ST TERRACE	MIAMI FL 33161
	<del>FRACOIS, RENE</del>	<del>865 NE 127TH ST</del>	<del>MIAMI FL 33161</del>

8. Name and Address of Current Registered Agent

FRACOIS, RENE  
865 NE 127 ST  
MIAMI FL 33161

9. Name and Address of New Registered Agent

Name

CARL ANDRE

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

330 NE 121 TERR

Suite, Apt. #, Etc.

MIA Florida

City

MIAMI

State

FL

Zip Code

33161

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 REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/8/99

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-27-99

Daytime Phone #

(305)

757-639

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**A-N-C Import Export Inc.**  
**7441 North Miami Ave**  
**Miami fl, 33150**

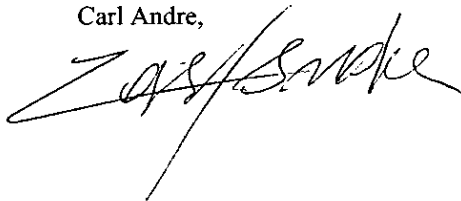
Florida Department Of State  
Division Of Corporation  
Tallahassee Florida , 32314

To whom it may concern

This letter is to inform you that the reason that I did not renew the Corporation is because I did not receive the application. I ask that you please reinstate this corporation and at the same time replace the name of the president and the registered agent by:  
Carl Andre 330 ne 121 Terrace Miami fl, 33161.

Thank you.

Carl Andre,

A handwritten signature in cursive script, appearing to read 'Carl Andre', written over a horizontal line.