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SECRETARY OF STATE
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Mailing Address

4636 PALM BEACH BLVD.
FT. MYERS FL 33905

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

4. Date Incorporated or Qualified To Do Business in Florida

05/05/1998

Suite, Apt. #, etc.

City & State

Country

Zip

Country

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
PD	LOPEZ, JORGE	4636 PALM BEACH BLVD.	FT. MYERS FL 33905
			500003438085--2 -10/24/00--01092--020
			****150.00 ****150.00
			SP

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LOPEZ, JORGE
4636 PALM BEACH BLVD.
FT. MYERS FL 33905

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

REGISTERED AGENT MUST SIGN

Date 10/13/00

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____

Daytime Phone #

10/13/00

pg 2 of 2

Oct.13th/2000

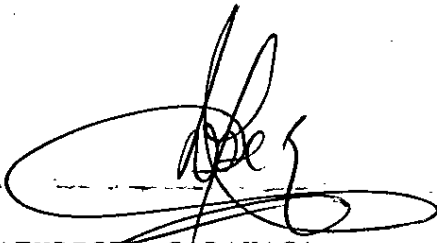
DIVISION OF CORPORATIONS
Annual Report/Reinstatement Section
P.O.BOX 6327
TALLAHASSEE, FL 32314

Gentlemen:

I just received from your office a Notice of Disolution or revocation of my Corporation. I am surprised with that notice, since I never received any notice of payment before that. I am including a check for \$150.00 to cover the annual fee for my Corporation. Please reinstate it. My business are bad and I don't have the money to pay the penalty for reinstatement.

Thankyou for your attention.

Yours,



ASA NATURISTA CARAVACA
JORGE LOPEZ -Pres.
4636 Palm Beach Blv.
Fort Myers, FL 33905