## page 10+2 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE

**Katherine Harris** 

Secretary of State

DIVISION OF CORPORATIONS

00 APR 24 PM 5: 02

SECRETAL EF STATE TALLAHASSEE, FLORIDA

DOCUMENT	#	P98000053039
----------	---	--------------

1. Corporation Name

1999-2000

B & L INTERNATIONAL CORP.

2. Principal Office Address 14671 SW 39TH COURT MIRAMAR, FL 33027-3722					
Suite, Apt. #, etc.		Suite, Apt. #, et	с.	4. Date Incorporated or Qualified To Do Business in Florida	
City & State MIRAMAR,	FL	City & State		5. FEI Number 65-0851626	Applied For -
Zip 33027	Country	Zip	Country	CERTIFICATE OF STATUS DESIRED (\$2.58.75)	Additional Fee require a Certificate of Status
	-VIII-VIII-VIII-VIII-VIII-VIII-VIII-VI		4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		

Name MELISSA LIS	50000324504 
Street Address (P.O. Box Number is Not Acceptable)  14671' SW 39TH COURT	****308.75 **
Suite, Apt. #, Etc.	
City MIRAMAR, FL	State Zip Code <b>FI</b> 33027

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of sect  Signature of Registered Agent	ion 607.0505 or 617.0503, F.S.
Signature of Registered Agent Lussa Lus	Date _APRIL_202000
REGISTERED AGENT MUST SIGN	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)	

/ State / Zip 
EL 33027-3722
, FL 33009
, FL 33009
_

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 filling 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 TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(954)458-7582 **APRIL 20, 2000** 

Daytime Phone #

## **B&LINTERNATIONAL CORP.**

14671 SW 39TH COURT MIRAMAR, FL 33027-3722 USA

Phone (954) 458-7582 Fax (954) 458-7582 Email BLINTLCORP@aol.com

April 25, 2000

Mr. Tyrone Scott
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
409 East Gaines St
Tallahassee, FL 32399

According to our telephone conversation and the Form that you sent by mail, enclosed please find the Check No 1006 with the total ammount of \$ 308.75 that corresponds the Annual Fee for the year 1999 since as we told you we never received the form, and the year 2000 plus the additional fee required for a 2000 certificate of status.

Sincerely,

GUSTAVÓ E. BORDA VICE-PRESIDENT

The state by the same