

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
BATHURIN HALL
TALLAHASSEE, FLORIDA 32301
DIVISION OF CORPORATIONS

FILED

99 NOV -8 AM 9:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000065350**

1. Corporation Name

EXOTIC POOLS OF MIAMI, INC.

Principal Place of Business

Mailing Address

4236 W 16 AVENUE
HIALEAH FL 33012

4236 W 16 AVENUE
HIALEAH FL 33012



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

4. Date Incorporated or Qualified To Do Business in Florida

07/24/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Hialeah FL

Zip

Country

Zip

Country

33014 Dade

5. FEI Number

65-0918077

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	RODRIGUEZ, FRANCISCO JR	7455 W 15 AVENUE	HIALEAH FL 33014
TD	RODRIGUEZ, FRANCISCO SR	7455 W 15 AVENUE	HIALEAH FL 33014
SD	RODRIGUEZ, MARIA C	7455 W 15 AVENUE	HIALEAH FL 33014

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

RODRIGUEZ, FRANCISCO JR
7455 W 15 AVENUE
HIALEAH FL 33014

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

Francisco Rodriguez **REQUIRED**

Date 11-2-99

REGISTERED AGENT MUST SIGN

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:

Francisco Rodriguez **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 11-2-99

Daytime Phone #

KE

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EXOTIC POOLS OF MIAMI, INC.
4236 W. 16 Ave.
Hialeah, FL 33012

November 2, 1999

Div. Of Corporations
BOX 6327
Tallahassee, FL 32314
Att: Stacey

Dear Sir or Madam:

What a surprise! We received a Notice of Dissolution for EXOTIC POOLS OF MIAMI, INC. Apparently, there is some mistake because we duly and timely filed our annual report and paid for it with check 2198 dated 3/15/99.

Please, find attached xerox of canceled check no. 2198 to the order of the Department of State. Maybe the error stemmed from our omission of the Document and Federal numbers. Accept our sincere apology. The numbers go with the xerox. Your Document number is P98000065350 and the IRS number is 65-0918077 as shown on the xerox of both sides of the canceled check.

Moreover, per your instructions we are attaching the completed form we received. As discussed over the telephone we did not receive you letter back in May.

Sincerely,


FRANK RODRIGUEZ JR.