

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 NOV -3 PM 3:02

DOCUMENT # P98000069507

1. Corporation Name

SUMMAX ASSOCIATES, INC.

Principal Place of Business

~~3050~~
~~3550 BISCAYNE BLVD., #300 301~~
~~MIAMI FL 33137~~

Mailing Address

~~3050~~
~~3550 BISCAYNE BLVD., #300 301~~
~~MIAMI FL 33137~~
~~3773 PINETREE DR~~
~~MIAMI BEACH, FL 33140~~

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

2. New Principal Office Address, If Applicable

~~3050 BISCAYNE BLVD.~~
~~Suite, Apt. #, etc.~~
~~SUITE # 301~~

3. New Mailing Office Address, If Applicable

~~3773 PINE TREE DR.~~
~~Suite, Apt. #, etc.~~

4. Date Incorporated or Qualified
To Do Business in Florida

08/10/1998

5. FEI Number

65-0856716

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	GARCIA, BYRON BYRON	3550 BISCAYNE BLVD., #300 3773 PINE TREE DR. MIAMI BEACH, FL 33140	MIAMI FL 33137 MIAMI BEACH, FL 33140
			200003473492--9 -11/21/00--01111--008 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

GARCIA, BYRON

~~3550 BISCAYNE BLVD., #300~~
~~MIAMI FL 33137~~

~~3773 PINETREE DR~~
~~MIAMI BEACH, FL~~
~~33140~~

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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]

Date 10.31.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305
10.31.00 573-8227

CR2040 (8/00)

Summax Associates

3050 Biscayne Blvd., Suite 301
Miami, FL 33137 USA
Tel: 305 573-8227 • Fax: 573-5112

October 31, 2000

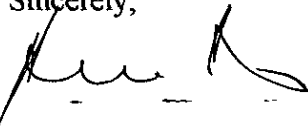
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

Getlemen:-

I received a notice of administrative dissolution or revocation for Summax Associates Inc., stating a second notice of annual reports/uniform business reports had been sent to the registered mailing address by June 9 of this year. I regret to inform you that such notice was not received at our mailing address. Accordingly, we respectfully request that the late fee, or reinstatement fee, be waived and Summax Associates Inc., be allowed to pay the regular filing fee of \$150.00. To expedite matters, I am enclosing a corporate check in the amount of \$150.00, payable to Florida Department of State. As your records would show, I was prompt to comply with your first notice request in 1999.

I would be most appreciative of your positive response to the request for a waiver of the late fee. Your support would allow Summax Associates Inc., a small, minority-owned business, to continue its regular operations. Please note our mailing address has changed as of October 9 of this year and the new address has been duly reflected in the accompanying form. If need be, I can be reached at 305 573-8227.

Sincerely,



Byron J. Garcia
Director & Registered Agent
3773 Pine Tree Dr.
Miami Beach, FL 33140