

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000071172

1. Corporation Name

NICOS INTERNATIONAL, INC.

2. Principal Office Address

3750 NW 114TH AVENUE

Suite, Apt. #, etc.

#6

City & State

MIAMI, FLORIDA

Zip

33178

Country

USA

3. Mailing Office Address

3750 NW 114TH AVENUE

Suite, Apt. #, etc.

#6

City & State

MIAMI, FLORIDA

Zip

33178

Country

USA

FILED

03 OCT -9 AM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 02-03

9/22/03 01089 000 60200

4. Date Incorporated or Qualified
To Do Business in Florida

8/14/98

5. FEI Number

65-0860164

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

OSCAR COLMENARES

500023672385

10/09/03--01067--019 **300 00

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

3750 NW 114TH AVENUE

Suite, Apt. #, Etc.

#6

City

MIAMI

State

FL

Zip Code

33178

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Pres 305 5820170

REGISTERED AGENT MUST SIGN

Date

10/7/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	OSCAR COLMENARES	3750 NW 114TH AVENUE	MIAMI, FL 33178

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 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

Pres 305 5820170

Date

Daytime Phone #

10/7/03

CR2E081 (10/02)

Nicos International, Inc.
3750 NW 114th Avenue, #6
Miami, FL 33178

Via Federal Express

October 7, 2003

Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

Pursuant to our telephone conversation of October 7, 2003 enclosed is a Corporate Reinstatement report for 2003.

This letter serves to confirm the September 2003 correspondence was not received, regarding the corrections needed for the reinstatement. The address on your letter was incorrect. Enclosed is the Reinstatement Form with a check for \$300, the balance owed for reinstatement. A \$600. check was cashed by the Department of State when we sent the original Reinstatement Form.

Sincerely,

A handwritten signature in black ink, appearing to read 'Oscar Colmenares', written over a horizontal line.

Oscar Colmenares
President