PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 99 APR

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

(1)

FILED
99 DEC -6 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000105165

1. Corporation Name

REIN'S CORP.

Principal Place of Business	Mailing Address
2010 N.E. 211 ST. N MIAMI BEACH FL 33179	2010 N.E. 211 ST. N MIAMI BEACH FL 33179

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
9401 HARDING AVENUE	9401 HARDING AVENUE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: SURFSIDE FLORIDA	City & State: SURFSIDE FLORIDA
Zip: 33154 Country: USA	Zip: 33154 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: 12/18/1998

5. FEI Number: 65-0883506 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED $8.75 Additional Fee required for a Certified Copy

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	REIN, MARIA F	2010 N.E. 211 ST.	N MIAMI BEACH FL 33179
			600003070796--6 -12/15/99--01036--006 ****158.75 ****158.75

REIN, MARIA F
2010 N.E. 211 ST.
N MIAMI BEACH FL 33179

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

Suite, Apt. #, Etc.

City | State: FL | Zip Code

CR2E040 (8/

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: Maria Rein - REQUIRED — Date: 10/15/99

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.

KE

SIGNATURE: Maria Rein - REQUIRED — 10/15/99 (305) 866 8324

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0040661 AF

(2)

10-15-99

to Florida Dep. of State
Division of corporations
Po Box 6327
Tallahasee FL. 32314-6327

Ref. P98000105165

Dear Sirs,

As per telephone conversation with Stacy, the following is an explanation of why I did not send my 1999 corporation annual report in time.

Reis corp. just began doing business this year.

I did not receive the form to file the annual report and did not know that I was required to do so. This is the first time I have my own business.

It is possible that it was a mail delivery problem, reason why I ask that my address be changed to where I conduct my business - 9401 Harding Ave - Surfside FL 33154

Sincerely Flora Reis