PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION Katherine Harris** FOR Secretary of State Part of the Francisco REINSTATEMENT DIVISION OF CORPORATIONS P98000106038 DOCUMENT # 99 DEC - 1 PM 3:37 1 Corporation Name XYZ TRADING, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Frace of Business Mailing Address 2 S. Biscayne Blvd. 2 S. Biscayne Blvd. Suite 3400 Suite 3400 Miami, Florida 33131 Miami, Florida 33131 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable 2 New Principal Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 1550 South Dixie Highway 1550 South Dixie Highway 12/22/98 Suite, Apt A, etc Suite 202 Suite 202 5. FEI Number Applied For City & State Coral Gables, Florida City & State 65-0901139 Not Applicable Coral Gables, Florida \$8.75. Additional Fee require for a Certificate of Status 33146 331<u>46</u> CERTIFICATE OF STATUS DESIRED USA 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) City / State / Zip Title(s) 1550 S. Dixie Highway Coral Gables, FL 33146 PTSD Teresita Q. Valls Suite 202 1550 South Dixie Highway D Enrique Valls Suite 202 Coral Gables, FL 33146 **6Q0003**089506----12/14/99--01074--004 ****750.00 ****750.00 REINSTATEMENT 99 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Valdes-Fauli Corporate Services, Inc. Enrique Valls
Address (P.O. Box Number is Not Acceptable) 2 South Biscayne Blvd., Suite 3400 1550 South Dixie Highway Miami, Florida 33131 Suite 214 State | Zip Code Coral Gables 33146 10. I, being appointed the registered agent of the above name ed corporation, am familiar with and accept 11. This corporation owes the current year (See other side for information on intangible tax.) Yes 🔲 No 🖾 Intangible Personal Property Tax due June 30. 12 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 807.0401 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. 305-308-8391 SIGNATURE AND PYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR