## **APPLICATION** FOR 3/ \*\*\* REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## **DOCUMENT#**

P99000012217

1. Corporation Name

## RODBEAR INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

3801 NE 207 STREET. #1503 AVENTURA FL 33180

3801 NE 207 STREET. #1503

AVENTURA FL 33180

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FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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If above a	idresses are	incorrect in any way, line thr	ough incorrect in	formation a	nd enter c	orrection below	PEINS	TATEME			_
				ng Office Address, If Applicable			Date Incorporated or Qualified				
19972 NE 37th court 19972						To Do Business in Florida 02/08/1999					
Suite, Apt. #, etc. Suite, Apt. #,			etc.								
City 9 Chata						15 002 125			Applied For		
City & State Aventura, FL City & State Avent			Ura. FL			Not Applica			Not Applicable		
Zip Country Zip			Country			CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status					
33180 33180						101 a Certificate of Status					
7. Names a	and Street Add	dresses of Each Officer and	or Director (Flor	rida nonprof	•						
Title(s)	Fitle(s) Name of Officers and/or Directors			Street Address of Each Officer and/or Director 3			City / State / Zip				
PTSD	GUENOUN, MOISES		3801 NE 207 STREET, #1503			AVENTURA FL 33180					
VPD	VPD HAUSMAN, FANNY		3801 NE 207 STREET, #1503			AVENTURA FL 33180					
VPD	ROSEN, MARCELO		3801 NE 207 STREET, #1503			AVENTURA FL 33180					
VPD	BRAHKA, ALEX			3801 NE 207 STREET, #1503			AVENTURA FL 33	180			
			7 0000351554 -12/28/000103 ****750.00 **			421					
						154		l		***750.00	
	18.1 Nam	e and Address of Current	Registered Age	nt		Table San Table San San	9. Name and A	ddress of New Regis	tered Agent		
						Name Toc	E I	PADUL		ٳٛ	Š
BENTATA, ARIEL						Street Address (F	O. Box Number	is Not Acceptable)			CKZEU40 (8/00)
100 SOUTH EAST 2ND ST.						999	PONC	E DE LE	50N 77	715	Ĭ
!NATIO	NS BAK TO	WER 37TH FLOOR				Suite, Apt. #, Etc	•			76	3
MIAMI	FL 33181		0			Citr <b>a</b>			State Zip	Code	
			. /)			CORAL	GABLE:	≤,		3134	
10. I, being	appointed the	registered agers of the act	ve names corpo	ration, am f	amiliar wit	h and accept the o	bligations of Secti	on 607.0505, F.S.		,	
Signature of Registered /		AND MA	TURE	RE	QU	HRED		Date /O	31/0	0	
		RE	GISTERED AG	ENT MUST	SIGN			/			
this reins owed by	statement app the corporat	officer or director or the receiplication, the reason for disso ion have been paid and the true and accurate, and my si	olution has been names of individ	eliminated, uals listed o	the corpo	rate name satisfies n do not qualify for	the requirements an exemption un-	of section 607.0401 or	617.0401, F.	S., that all fees	
SIGNAT	URE:	SIGNATU GNATURE AND TYPED OR PR	NED WANTE OF S	IGNING OFF	UIR ICER OR D	RED IRECTOR		10/31/00 Date	<i>305 ტ</i> Daytime P	509-4248 hone #	