

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FOR REINSTATEMENT

FILED

02 NOV -7 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000015542

1. Corporation Name

REGOR CORPORATION

Principal Place of Business

1840 SW 81ST TERRACE
DAVIE FL 33324

Mailing Address

1840 SW 81ST TERRACE
DAVIE FL 33324

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

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/17/1999

5. FEI Number

65-0895120

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
PD	BARGAS, SARA	2450 NE 135TH STREET #111 1840 SW 81 TERRACE	N. MIAMI FL 33161 DAVIE, FL 33324
VD	WHITEHOUSE, KATHY	2450 NE 135TH STREET #111 1840 SW 81 TERRACE	N. MIAMI FL 33161 DAVIE FL 33324 ZIP WAS 33181

100008879341
11/07/02--01089--020--**150.00

8. Name and Address of Current Registered Agent

PEREZ, BEHAR & ASSOCIATES, INC.
14730 N.E. 10TH AVENUE
N. MIAMI FL 33161

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

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:

Kathy Whitehouse
KATHY WHITEHOUSE
10/31/02 954-472-2717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/02)

Katherine Marie Whitehouse
1840 SW 81st Terrace
Davie, FL 33324
954-472-2717

October 31, 2002

Mr. Mitch Katz
10729 S.W. 104th St.
Miami, FL 33176

Dear Mitch,

Enclosed, please find the dissolution I spoke to you about on the phone, along with my check for \$150.00.

As I explained, I never received any notice or bill from the state this year and didn't realize I had missed the payment. The reason I didn't receive it could be that I had moved last year, as you mentioned, and upon further investigation, I noted that the addresses for the officers were incorrect on the dissolution form.

Thanks so much for all your help with this and if there's anything I can do for you, please let me know!!

Sincerely,


Kathy Whitehouse

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