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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



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

FILED

02 MAY -2 PM 4:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # R99000018865

1. Corporation Name

ROBIT'S SERVICE INC.

2. Principal Office Address

7171 Coral Way

Suite, Apt. #, etc.

Suite 209

City & State

Miami, FL

Zip

33155

Country

USA

3. Mailing Office Address

7171 Coral Way

Suite, Apt. #, etc.

Suite 209

City & State

Miami, FL

Zip

33155

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

650899341

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

400005556014--4

-05/17/02--01004--016

****300.00 ****300.00

7. Name and Address of Current Registered Agent

Name

Ishmael Blanco

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

7171 Coral Way

Suite, Apt. #, Etc.

Suite 209

City

Miami

State

FL

Zip Code

33155

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

REGISTERED AGENT MUST SIGN

Date

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
SD	Serafina Guerra	2286 W. 74 St., #102	Hialeah, FL 33016
PD	Ishmael Blanco	2286 W. 74 St., #102	Hialeah, FL 33016

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:

Ishmael Blanco

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ishmael Blanco, President

4/30/02

Date

Daytime Phone #

CR2E081 (9/01)

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Robi's Service Inc.
7171 Coral Way
Suite 209
Miami, Florida 33155

April 30, 2002

SENT VIA FEDERAL EXPRESS

Department of State of Florida
Division of Corporations
(Reinstatement Section)
409 East Gaines Street
Tallahassee, Florida. 32314

Re: Reinstatement of Robi's Service Inc. and Payment of 2002 Annual Fee

Dear Reinstatement Section:

Please be advised that we never received Robi's Service Inc.'s 2001 Annual Report nor the 2002 Annual Report. Please check your records for the correct address which is indicated above.

Enclosed is the Corporate Reinstatement form for Robi's Service Inc. for the year 2001 as well as a check for \$300 payable to the Department of State. Of this \$300, \$150 pertains to the reinstatement for the year 2001 and \$150 pertains to the annual fee for the year 2002.

Thanks.


Ishmael Blanco, President

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