

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

\$750.00

FILED

02 APR 17 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000040483

1. Corporation Name

CHACHY'S AUTO TINT, INC.

NO 2000008043

Principal Place of Business

Mailing Address

2609 N.W. 103RD STREET
MIAMI FL 33148

~~2609 N.W. 103RD STREET
MIAMI FL 33148~~



REINSTATEMENT 00-02

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

4. Date Incorporated or Qualified To Do Business in Florida

05/04/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

20100 NW 57 CT

5. FEI Number

65-0943695

Applied For

Not Applicable

City & State

City & State

Miami, FL

Zip

Country

Zip

Country

33015

FL, USA

CERTIFICATE OF STATUS DESIRED

\$2.75 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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	BERMUDEZ, FRANCISCO	20100 N.W. 57TH COURT	MIAMI FL 33015
VP	Bermudez Olga	20100 NW 57 CT	Miami FL 33015
S	Bermudez Olga	20100 NW 57 CT	Miami FL 33015
			300005391433--6 -04/30/02--01040--001 *****750.00 *****750.00
			300005391433--6 -04/30/02--01040--002 *****300.00 *****300.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GASS, DANIEL G
10001 NW 50TH STREET
SUITE 204
SUNRISE FL 33351

Name

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

Suite, Apt. #: Etc.

City

300005391433--6

-04/30/02--01040--003

*****8 State *****8.75

FL

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

[Signature]

Date

3/1/02

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)(f), 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/02
Date

305-696-7798
Daytime Phone #

CR2E040 (8/00)



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

March 22, 2002

CHACHY'S AUTO TINT, INC.
20100 NW 57 CT
MIAMI, FL 33015

SUBJECT: CHACHY'S AUTO TINT, INC.
Ref. Number: P99000040483

We have received your document for CHACHY'S AUTO TINT, INC. and check(s) totaling \$758.75. However, your check(s) and document are being returned for the following:

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2000 corporate annual report/uniform business report form. To reinstate, the corporation must submit a completed reinstatement application/annual report/uniform business report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$600.00 reinstatement fee, \$61.25 filing fee per year for the years 2000 through the current year, \$88.75 corporate supplemental fee for 1992 and every year thereafter.

Therefore, the total amount due to reinstate the corporation is \$1050.00. Add an additional \$8.75 for each certificate of status requested.

The total amount due includes the 2002 Annual Report/Uniform Business Report and Supplemental Fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott
Document Specialist

Letter Number: 302A00017192