

APPLICATION
FOR
REINSTATEMENT



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

FILED

00 OCT 23 PM 1:26

DOCUMENT # P99000069742

1. Corporation Name

BUIGAR, INC.

Principal Place of Business

Mailing Address

5291 SOUTHWEST 127TH AVE.
MIAMI FL 33175

5291 SOUTHWEST 127TH AVE.
MIAMI FL 33175

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/05/1999

5. FEI Number

65-0939980

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	BUIGAS, RAFAEL J JR.	5291 SOUTHWEST 127TH AVE.	MIAMI FL 33175
VD	GARCIA, JOSE R JR.	5291 SOUTHWEST 127TH AVE.	MIAMI FL 33175

100003456021-8
-11/07/00--01116--015
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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.

Signature of
Registered Agent

SIGNATURE REQUIRED

Date

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)(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:

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

10/19/00
Date

305551-1446
Daytime Phone #

282

Buigar, Inc.
5291 SW 127 Ave.
Miami, Fl. 33175
October 18, 2000

Florida Dept. of State
Division of Corporation
Tallahassee, Fl. 32314-6327

Dear Florida Dept. of State,
We did not receive the original Corporation documents. We received a notice stating that we were delinquent in paying fees. I'd call the dept and I was informed that they would send me new forms. The only forms we received were the reinstatement forms. I'm writing this document explaining the course of events as instructed by the dept.

Sincerely,

Jose Garcia

