

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED

02 FEB 14 AM 9:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # S47905**

**1. Corporation Name**

**BTL INTERNATIONAL ENTERPRISES, INC.**

**2. Principal Office Address**

**18031 BISCAYNE BLVD.**

**3. Mailing Office Address**

**18031 BISCAYNE BLVD.**

Suite, Apt. #, etc.

**804 TOWER S-3**

Suite, Apt. #, etc.

**804 TOWER S-3**

City & State

**AVENTURA FL**

City & State

**AVENTURA FL**

Zip

**33160**

Country

Zip

**33160**

Country

**4. Date Incorporated or Qualified  
To Do Business in Florida**

**5. FEI Number**

**65-0255480**

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

**\$8.75 Additional Fee required  
for a Certificate of Status**

**7. Name and Address of Current Registered Agent**

Name

**KOSTETSKY, FERNANDO I.**

**300005022263**

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

**18031 BISCAYNE BLVD.**

Suite, Apt. #, Etc.

**804 TOWER S-3**

City

**AVENTURA**

State

**FL**

Zip Code

**33160**

**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

*[Signature]*

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
PTD	KOSTETSKY, FERNANDO I.	18031 BISCAYNE BLVD #804 TOWER S-3	AVENTURA FL 33160
SV	KOSTETSKY, JUANA F.	18031 BISCAYNE BLVD #804 TOWER S-3	AVENTURA FL 33160

**10. I certify that I am an officer or director of 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]*

**FERNANDO KOSTETSKY**

**PRESIDENT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

February 1, 2002

BTL INTERNATIONAL ENTERPRISES, INC.  
18031 BISCAYNE BLVD 804 TOWER S-3  
AVENTURA, FL 33160 US

SUBJECT: BTL INTERNATIONAL ENTERPRISES, INC.  
Ref. Number: S47905

We have received your document for BTL INTERNATIONAL ENTERPRISES, INC. and check(s) totaling \$900.00. However, your check(s) and document are being returned for the following:

Pursuant to section 607.1422(1)(b), 617.1422(1)(b), or 608.4482, Florida Statutes, your designated registered agent must acknowledge the designation by signing in the appropriate block of the form.

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.

Marquitta Williams  
Document Specialist

Letter Number: 402A00006361