

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 054971  
1. Corporation Name  
UNIVERSAL CHARTERS, INC.

FILED

97 JUL 21 AM 11:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
MIAMI, FLORIDA  
Mailing Address  
8051 NW 36TH ST.  
SUITE 600-B  
MIAMI, FL. 33166

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  
See #1 Above  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida 5/24/91

5. FEI Number 65-0273910 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status

REINSTATEMENT 95-97

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 (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
Pres. Dir.	<u>RAUL R. DUBE</u>	<u>8051 NW 36TH ST</u> <u>6303 BLUE SUITE 600-B</u>	<u>MIAMI, FL. 33166</u>
Dir.	<u>Pedro Pelaez</u>	<u>11</u>	<u>800002243158--1</u> <u>-07/21/97--01119--005</u> <u>***1080.00 ***1080.00</u>
			<u>800002243158--1</u> <u>-07/21/97--01119--006</u> <u>*****8.75 *****8.75</u>

8. Name and Address of Current Registered Agent

RAUL R. DUBE  
8051 NW 36TH ST.  
SUITE 600-B  
MIAMI, FL. 33166

9. Name and Address of New Registered Agent

Name JAMES WEINTRAUB  
Street Address (P.O. Box Number is Not Acceptable)  
2250 SW 3RD AVE.  
Suite, Apt. #, Etc.  
5TH FL  
City MIAMI State FL Zip Code 33129

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 James Weintraub  
REGISTERED AGENT MUST SIGN

Date 7/18/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information on intangible tax.)

12. 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: James Weintraub (POWER OF ATTORNEY)  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/18/97 (305) 8580220  
Date Daytime Phone #