

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

97 MAY -2 AM 9:14

Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: DOCUMENT # **S57462**

B.E.C. ENTERPRISES OF MIAMI, INC.
1221 BRICKELL AVE
26TH FLOOR
MIAMI, FL 33131

2. If Address of Record is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

1221 BRICKELL Avenue

Address:

Suite 1010

Address

MIAMI FLORIDA

City and State

33131

Zip Code

REINSTATEMENT 92-97

3. Date Incorporated or Qualified To Do Business in Florida

06/05/1991

4. FEI Number

65-0265432

FEI Number Applied For

FEI Number Not Applicable

5. \$8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☒

6. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
P/S/D	RONALD G. WILLIAMS	1221 BRICKELL # 1010	MIAMI FL 33131

400002176184--2
-05/13/97--01018--013
*****1583.75 ***1583.75**

5/08/97

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

KRUGER, EDWARD
1221 BRICKELL AVE
26TH FLOOR
MIAMI, FL 33131

8. Name and Address of New Registered Agent and/or Office

Name

G. WILLIAM LINDSEY

Street Address (Do NOT Use P.O. Box Number)

4111 VAN BUREN ST.

Street Address (Do NOT Use P.O. Box Number)

City and State

HOLLYWOOD

FL.

Zip

33021

9. 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]

REGISTERED AGENT MUST SIGN

Date **5-2-97**

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box ☐ (See other side for additional information.)

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., and that all fees owed by the corporation have been paid. 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 of Officer or Director

[Signature]

Date **5-2-97**

Daytime Phone # **(305) 536-2400**

Typed or printed name of signing officer or director **RONALD G. WILLIAMS**