

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

98 DEC 21 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V05995

1. Corporation Name

BASA INVESTMENT, INC.

Principal Place of Business

Mailing Address

9515 MOUNTAIN LAKE DR
OOLTEWAH TN 37363
US

6830 LEE HWY
CHATTANOOGA TN 37421
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

9628 Pearson Rd.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Harrison, TN

City & State

Zip

37341

Country

Hamilton

Zip

Country



REINSTATEMENT

4. Date incorporated or Qualified
To Do Business in Florida

01/13/1992

5. FEI Number

65-0305434

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)

| 1 Title(s) | 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 / State / Zip |
|---------------|---|--|-------------------------|
| P | BASADRE JR, FRANCISCO | 9515 MOUNTAIN LAKE DR 9628 Pearson Rd | OOLTEWAH TN |
| ST | BASADRE, HELENA | 9515 MOUNTAIN LAKE DR same as above | OOLTEWAH TN |
| STD | BASADRE, LOURDES | 11405 SW 32 ST | MIAMI FL |
| | | | |
| | | | |
| | | | |
| | | | |

500002725265--4
12/29/98 01074 025
****750.00 ****750.00

8. Name and Address of Current Registered Agent

FRANK QUINTERO JR. P.A.

3400 CORAL WAY 815 PONCE DE LEON BLVD
SUITE 501 CORAL GABLES, FL 33134
MIAMI FL 33145

9. Name and Address of New Registered Agent

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

FRANK QUINTERO JR. P.A.
REGISTERED AGENT MUST SIGN

Date

11/25/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-23-98
Date

423-344-0544
Daytime Phone #

CR2E040 (9/98)