$365.00 (1)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

Q97122

FILED
AND
FILED

1997 DEC -5 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V14387

1. Corporation Name

THE ALUMINUM DEPOT, INC.

Principal Place of Business	Mailing Address
16969 NW 67th AVE, Suite #107 Miami, FL 33015	

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: 2/12/92

5. FEI Number: 65-0310928 ☐ 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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	Alcibiades Rodriguez	2678 Meadowood Drive	Weston, FL 33332
S/T	Sylvia Rodriguez	2678 Meadowood Drive	Weston, FL 33332
V	Michael Rodriguez	1455 Meadows Blvd.	Weston, FL 33327
D	Juan Garcia Barberena	Yanyuas Miranla 19 , Apt 19 Izquierdo	Pamplona, Spain

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8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Sylvia Rodriguez 2678 Meadoow Drive Weston, FL 33332	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City / State: FL / Zip Code

CR2E040 (12/96)

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 _____ Date 11/19/97

REGISTERED AGENT MUST SIGN

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: _____ 11/19/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(2)

The Aluminum Depot, Inc.
16969 N.W. 67th Ave, Suite 107
Miami, FL 33015

November 19 1997

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: EIN# 65-0310928

Dear Sirs:

Enclosed is my application for reinstatement along with a check in the amount of $330.00. We have moved several times and relocated my business throughout the past few years. I did not receive the annual report forms and was unaware that I had to file a corporate annual report. Kindly abate all penalties for late filing.

Should you have any questions do not hesitate to contact me at: (305)827-0930.

Sincerely,

Alcibiades Rodriguez
President

Enclosures