

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

97 MAY -6 AM 8:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V36916**

1. Corporation Name

M.E.T. LIQUIDATING CORPORATION

Principal Place of Business

Mailing Address

8181 NW 14TH ST
MIAMI FL 33126

8181 NW 14TH ST
MIAMI FL 33126

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

2. New Principal Office Address, If Applicable
1400 NW 107th AVE.
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable
1400 NW 107th AVE.
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

05/14/1992

City & State
MIAMI FL

City & State
MIAMI FL

Zip
33172

Country

Zip
33172

Country

5. FEI Number

65-0332526

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
D/P/KEO	ADLER, MICHAEL M	8181 NW 14TH ST 1400 NW 107th AVE.	MIAMI FL 33172
D/S/T	ADLER, HERBERT Arriazurieta, Luis	8181 NW 14TH ST 1400 NW 107th AVE	MIAMI FL 33172
DVOF D/EV/AS	LEVY, JOEL	8181 NW 14TH ST 1400 NW 107th AVE	MIAMI FL 33172
BP AS	GOLDENBERG, IGNACIO Adler, Linda K.	8181 NW 14TH STREET 1400 NW 107th AVE.	MIAMI FL 33172
			B518-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LEVY, JOEL
8181 NW 14TH ST
MIAMI FL 33126

Name

SAME

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

1400 NW 107th AVENUE

Suite, Apt. #, Etc.

City

MIAMI

State

Zip Code

FL

33172

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

Joel Levy

REGISTERED AGENT MUST SIGN

Date

April 30, 1997

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

800002178466--3

05/14/97
******915.00 ****915.00**

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)(l), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joel Levy

4/30/97
Date

305-392-4050
Daytime Phone #

CR22040 (7/96)