

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 # **V49853**

1. Corporation Name

INHOLTRA, INC.

Principal Place of Business

Mailing Address

**1918 Harrison Street, Suite 207
Hollywood, Florida 32020**

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

REINSTATEMENT 08-99

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
65-0348140

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
CEOD	Herm Van Asselt	1918 Harrison Street, #207	Hollywood, FL 32020
Sec.	Eric J. Kaplan	9200 S. Dadeland Blvd, #619	Miami, Florida 33156
P	Edwina Van Asselt	1918 Harrison Street, #207	Hollywood, FL. 32020

**200002807562--8
-03/16/99--01048--001
****900.00 ****900.00**

8. Name and Address of Current Registered Agent

**Craig R. Dearr
9100 South Dadeland Blvd.
Miami, Florida 33156**

9. Name and Address of New Registered Agent

Name
Eric J. Kaplan
Street Address (P.O. Box Number is Not Acceptable)
9200 South Dadeland Blvd.,
Suite, Apt. #, Etc.
Suite 619
City
Miami

State Zip Code
FL 33156

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

E. Kaplan

REGISTERED AGENT MUST SIGN

Date

3/10/99

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:

E. Kaplan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/99
Date

**305
670-0450**
Daytime Phone #