

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 JUL 14 PM 10:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** V64171

**1. Corporation Name**

GONZALEZ TASCON CORPORATION

**2. Principal Office Address**

9844 N.W. 126 TERRA

**3. Mailing Office Address**

CALLE 114A No. 11A 40

Suite, Apt. #, etc.

HIALEAH GARDENS

Suite, Apt. #, etc.

City & State

FLORIDA

City & State

BOGOTA

Zip

33018

Country

USA

Zip

0008

Country

COLOMBIA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

09-16-1992

**5. FEI Number**

650355950

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☒

\$8.75 Additional Fee required  
for a Certificate of Status

REINSTATEMENT

02-03

200021519322

07/14/03--01064--012 \*\*908.75

**7. Name and Address of Current Registered Agent**

Name

DIONISIO GONZALEZ

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

8326 N.W. 68 th STREET

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33166

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*[Signature]*

REGISTERED AGENT MUST SIGN

Date JUNE 25/2003

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	DIONISIO GONZALEZ	8326 N.W. 68 th STREET	MIAMI, FL. 33166
D	RUTH TASCON	9844 N.W. 126 TERRA	HIALEAH GARDENS FL 33018

**10. 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]* DIONISIO GONZALEZ  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUNE 25/2003

Date

Daytime Phone #

CR2E081 (10/02)

27715