

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 741477 (4)

1. Corporation Name

CORONET LANE CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

1100 South 20th Ave.
Hollywood, Fl. 33020

P.O. Box 630052
North Miami Beach,
Fl. 33163

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

02-99

4. Date Incorporated or Qualified
To Do Business in Florida

01/27/78

5. FEI Number

59-2416951

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
PD	Cueva, Jerry	2001 N.E. 181st Street	N.Miami Beach, Fl.33162
VD	Buisson, Beverly	1100 S. 20th Ave. Apt.3	Hollywood, Fl.33020
STD	Cueva, Sandra	2001 N.E. 181st Street	N.M.Beach, Fl.33162

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-03/23/99--01031--008
***297.50 ***297.50

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Cueva, Jerry
2001 N.E. 181 Street
N.Miami Beach, Fl.33163

Name

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

Suite, Apt. #, Etc.

City

State Zip Code
FL

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

Jerry Cueva

REGISTERED AGENT MUST SIGN

Date

3-10-99

11. This corporation owes the current year
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See instructions 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 617.0301, 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)(b), 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

Jerry Cueva

3-10-99

Date

Typed Name

(305) 945-8377