

2004

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUL 12 AM 9:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 744032

1. Corporation Name

Meadowbrook Lakes Condominium Apartments,
Building #12, Inc.

2. Principal Office Address

Building 12

Suite, Apt. #, etc.

315 SE 11th Terrace

City & State

Dania, Florida

Zip

33004

Country

Broward

3. Mailing Office Address

Building 12

Suite, Apt. #, etc.

315 SE 11th Terrace

City & State

Dania, Florida

Zip

33004

Country

Broward

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-1889711

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DATATAX (2000), INC.

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

6331 Stirling Rd.

Suite, Apt. #, Etc.

City

Danie

State
FL

Zip Code

33314

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

Date

REGISTERED AGENT MUST SIGN

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	Bernard Seifstein	315 SE 11 th Terrace #307	Dania, FL 33004
VP	Gladys Vucci	315 SE 11 Terr. # 407	Dania, FL 33004
S	Lucy Saccol	315 SE 11 Terr. # 208	Dania, FL 33004

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:

Bernard Seifstein

BERNARD SEIFSTEIN

7/8/04 (914) 929-5411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)