

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
02 APR -5 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N05257

1. Corporation Name
VILLAS LINDAS TOWNHOUSES ASSOC. INC.

300005308099--1
-04/19/02--01045--018
****848.75 ****848.75

2. Principal Office Address **3. Mailing Office Address**
~~1766 West 59 Street~~ ~~AMERICA MGNT. & REALTY INC~~

Suite, Apt. #, etc. Suite, Apt. #, etc.
2011 West 62 Street

City & State City & State
HIALEAH, FL. HIALEAH, FL?

Zip Country Zip Country
33012 MIAMI DADE 33016 MIAMI DADE

4. Date Incorporated or Qualified To Do Business in Florida 10/09/1992
5. FEI Number 592566325 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
HENRY HERNANDEZ
Street Address (P.O. Box Number is Not Acceptable)
2011 WEST 62 Street
Suite, Apt. #, Etc.
City
HIALEAH State FL Zip Code 33016

REINSTATEMENT 92-02

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 *Henry Hernandez* Date 04-01-02
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
PD	CANO, GRISELL	1770 WEST 59 Street	HIALEAH, FL. 33012
TD	GARCIA, YADIRA	1768 WEST 59 STREET	HIALEAH, FL? 33012
SD	FERNANDEZ, OLIMPIA	1756 WEST 59 STREET	HIALEAH, FL. 33012

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: *Yadira Garcia* Date 4/1/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (305) 558-9820
Daytime Phone #

CR2E081 (9/00)