PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATION STATEMENT	FLORIDA DEPART Secretary DIVISION OF CO	of State	,	01	FILLUN 2	ED 9 PM 12: ( XY OT STAT SEE, FI ON	)9 E		
DOCUMENT # 19900006242						CATES	Ser Hom	11.7.		
KING'S VILLAS CONDOMINIUM ASSOCIATION,										
INCO? INC										
2. Principal Office Address 3. Mailing C			ffice Address			100038425061 06/29/0401060001 **183.75				
115 3	W. 27 ST # 104	1152 W.	2 W. 27 ST.			9/04	-0106000	11 **185	3.75<	
Suite, Apt. #	1	Suite, Apt. #, etc.				4. Date Incorporated or Qualified				
	104	# 104			To Do Busi		irida // -	- 12 - 9	9	
City & State	1	City & State  HIALFAH	FL		5. FEI Numbe	) 	19	Appl	lied For	
· HIAL	Country	Zip	Country			9693	~-		Applicable A	
3301	0 5	33010	US		G. CERTIFICATE	E OF STATU		.75 Additional F for a Certificate		
7. Name and Address of Current Registered Agent										
	Name JESUS ISRAEL YERA									
Street Address (P.O. Box Number is Not Acceptable)										
Street Address (P.O. Box Number is not Acceptable)  1152 w. 27 57# 104  Suite, Apt. #, Etc.  # 104										
,	City HIALEAH					State FL	Zip Code			
8. I, being	appointed the registered agent of the abo	ve named corporation, am f	amiliar with a	and accept t	ne obligations of secti	on 607.050	5 or 617.0503, F.S	S. ~	01/04	
Signature of Registered Agent REGISTERED AGENT MUST SIGN						bligations of section 607.0505 or 617.0503, F.S.  Date				
9. Names	and Street Addresses of Each Officer and	/or Director (Florida nonpro	fit corporatio	ons must list	at least 3 directors)					
Titles	Name of Street Address of Each						City / Str	ate / Zip		
<u> </u>		1159	1162 37 ~=							
PRES.	JESUS ISRAEL Y	ERA-			# 104	HIAL	PAH-FU	33010		
VP.	FRANCISCO FELIPE M	ADIEDO 115			T. + 204	HIA		330,0		
T	EPUARDO TORRES	1129	w.	ع رو	T # 202	HIA	WAH PL	33010		
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-			AIL			SECT.				
this re owed i	y that I am an officer or director or the rece instatement application, the reason for diss by the corporation have been paid and the s application is true and accurate, and my s	clution has been eliminated names of individuals listed o	, the corpora on this form o	ite name sat do not qualify	sfies the requirements for an exemption und	s of section	607.0401 or 617.0 119.07(3)(i), F.S. T	0401, F.S., that The information i	all fees indicated	
SIGNA	TURE: Yesa	<u></u>		····	6-	24-04	305-	. 456 - 23 aytime Phone #	330	
,	SIGNATURE AND TYPED OR PR	INTED NAME OF SIGNING OF	FICER OR DIF	RECTOR		Date	Da	aytime Phone #	ı	



## Lester Barreras c.p.a., p.a

June 11, 2004

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: - King's Villas Condominium Association, Inc.

Dear Sir or Madam,

We are the accountants for the above referenced company and have been requested to respond to you on their behalf.

Our client informed us that the corporation's status is listed as "inactive" at the Division of Corporations and requested that we research why. Upon our review, it came to our attention that the address listed as Registered Agent is an incorrect address. The registered agent has not lived at that address for several years; therefore our client has never received any Annual Report Notices. The correct address for the Registered Agent is:

Jesus Israel Year

1152 W. 27 St., #104 Hialeah, FL 33010

Because of this, we are respectfully requesting that our client does not get penalized the reinstatement fee. Our client would like to pay for each year's annual report at the original cost of \$61.25 per year including the current year. (2002, 2003 and 2004). Enclosed is their check for payment in order to bring the corporation's status up to date.

Should you have any questions, please feel free to contact me at your earliest convenience.

Sincerely,

LESTER BARRERAS, C.P.A., P.A.

Lester Barreras, C.P.A.

LB/cmc