

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS



APPROVED  
AND  
FILED

1997 AUG 21 PM 12: 48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 449084

1. Corporation Name

International Land Sales, Inc.

Principal Place of Business

Mailing Address

4600 W. Commercial Blvd.  
Ft. Lauderdale, Fl. 33319

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable  
5920 SW 37th Ave.

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida 3/22/74

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-1549276

Applied For

Not Applicable

City & State

Ft. Lauderdale

City & State

Zip

33312

Country

Broward

Zip

Country

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
President	James Cline	790 E. Broward Blvd., STE303	Ft. Lauderdale, Fl. 33301
Vice President	Wade George	2875 W. Broward Blvd.	Ft. Lauderdale, Fl. 33312

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REINSTATEMENT

8. Name and Address of Current Registered Agent

Neil J. Lahurd  
Box 191 2809 Bird Ave.  
Miami, Fl. 33133

9. Name and Address of New Registered Agent

Name Stewart Barcalow  
Street Address (P.O. Box Number is Not Acceptable)  
5920 SW 37th Ave.  
Suite, Apt. #, Etc.

City

Ft. Lauderdale

State

FL

Zip Code

33312

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 *Stewart Barcalow*  
REGISTERED AGENT MUST SIGN

Date 8/15/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side 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 617.0401, 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:

*Wade George*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-15-97  
Date

(954) 583-9110  
Daytime Phone #

CR2E040 (12/96)