PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
98 APR 24 AM 11:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 575431

1. Corporation Name

Pioneer Gardens, Inc.

Principal Place of Business	Mailing Address
19900 S.W. 265th Street Homestead, FL 33031	same

300002504073--1
-04/28/98--01123--014
***1350.00 ***1350.00

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
23905 S.W. 167th Avenue	23905 S.W. 167th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Homestead, Florida	City & State: Homestead, Florida
Zip: 33031 Country: DADE	Zip: 33031 Country: DADE

4. Date Incorporated or Qualified To Do Business in Florida: 06/12/1978

5. FEI Number: 59-1823762 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)	City / State / Zip 4
PD	Roy Gans	23905 S.W. 167th Avenue	Homestead, Florida 33031
STD	Shannon Gans	23905 S.W. 167th Avenue	Homestead, Florida 33031
VPD	June Criley	23905 S.W. 167th Avenue	Homestead, Florida 33031

REINSTATEMENT 94-98 4/24/98

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Roy Gans 19900 S.W. 265th Streed Homestead, Florida 33031	Name: ROY GANS Street Address (P.O. Box Number is Not Acceptable): 23905 S.W. 167th Avenue Suite, Apt. #, Etc. City: Homestead State: FL Zip Code: 33031

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: Roy Gans REGISTERED AGENT MUST SIGN. Date: 4/23/98

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: Roy Gans ROY GANS 4/23/98 (305) 246-7555