

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

AND
FILED

98 NOV 23 AM 10:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 633781

1. Corporation Name

AL AROSTEGUI, P.A.

Principal Place of Business

Mailing Address

3649 ROYAL PALM AVENUE
COCONUT GROVE FL 33133

3649 ROYAL PALM AVENUE
COCONUT GROVE FL 33133

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

08/27/1979

5. FEI Number

59-1926923

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PS	AROSTEGUI, AL	3649 ROYAL PALM AVENUE	COCONUT GROVE FL 33133

200002701772--0.
-12/03/98--01065--013
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

AROSTEGUI, AL
3649 ROYAL PALM AVENUE
COCONUT GROVE FL 33133

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11/20/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/20/98

305-446-5026

CR2E040 (9/98)

Al Arostegui PA
FEI # 59-1926923

RE/MAX

Above
the
Crowd!

To Department of State,

I have carefully reviewed all of my files and cannot find anything to indicate that I received an annual report form to file.

Although the address is correct we have in the past had some problems with our mail delivery.

Attached you will find a check for \$150 for our Corporation's Annual dues. I will be looking for the 1999 papers in the first quarter next year.

Thank you,

Al Arostegui, CRS, GRI
Broker - Associate

RE/MAX

Prestige Properties

3560 Main Highway • Coconut Grove, Florida 33133

Office: (305) 444-7111 Fax: (305) 445-2224 Toll Free: (800) 708-4141