

fs 172

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 15, 2004 8:00 A.M.
Secretary of State

DOCUMENT # 713432

1. Corporation Name

713 Collins Condominium Inc.

2. Principal Office Address

713 Collins Avenue

Suite, Apt. #, etc.

#21

City & State

Miami Beach FL

Zip

33139

Country

USA

3. Mailing Office Address

713 Collins Avenue

Suite, Apt. #, etc.

#21

City & State

Miami Beach FL

Zip

33139

Country

USA

REINSTATEMENT 03-04

**4. Date Incorporated or Qualified
To Do Business in Florida**

10/6/1967

5. FEI Number

59-1379861

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

William Borelly

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

713 Collins Avenue

Suite, Apt. #, Etc.

#21

City

Miami Beach

State

FL

Zip Code

33139

100039641021
07/28/04--01036--012 **122.50

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

William Borelly
REGISTERED AGENT MUST SIGN

Date 7/6/04

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	William Borelly	713 Collins Ave. #21	Miami Beach FL 33139
VPD	Raul Choque	713 Collins Ave. #35	Miami Beach FL 33139
STD	Carlos Comptis	713 Collins Ave. #31	Miami Beach FL 33139

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:

William Borelly
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/6/04

Date

Daytime Phone #

CFR2E081 (10/02)

B 202

713 COLLINS CONDOMINIUM, INC.

713 COLLINS AVENUE # 21
MIAMI BEACH, FLORIDA 33139

July 6, 2004

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Fl. 32399

Attn: Reinstatement Section

Re: Document # 713432

Dear Sir or Madam:

In reference to a telephone conversation with one of your representatives, we are enclosing our application for reinstatement along with the necessary filing fees for a non-profit corporation. As we stated in the phone conversation, we changed our mailing address and thus never received our UBR reports. We ask that you please pardon the late fee since this problem was due to circumstances beyond our control. If there is any problem processing this report please contact us immediately.

Sincerely,

William Boreddy
713 Collins Condominium, Inc.