

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 MAR 10 PM 4:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 726035

1. Corporation Name

Vjne Gardens Condominium Association, Inc.

200145416092
03/10/09--01028--001 **385.75

REINSTATEMENT 07-09

2. Principal Office Address - No P.O. Box #

c/o Foundation Property Services

Suite, Apt. #, etc.

4750 W. Commercial Blvd.

City & State

Tamarac, FL

Zip

33319

Country

Broward

3. Mailing Office Address

c/o Foundation Property Services

Suite, Apt. #, etc.

4750 W. Commercial Blvd.

City & State

Tamarac, FL

Zip

33319

Country

Broward

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

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

PeytonBolin, PL

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

4804 W. Commercial Blvd.

Suite, Apt. #, Etc.

City

Fort Lauderdale

State

FL

Zip Code

33319

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

REGISTERED AGENT MUST SIGN

Date 2/25/09

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
P	Daniel Dulude	3401 NW 47th Avenue V604	Lauderdale Lakes, FL 33319
VP	Pierre Dion	3400 BW 48th Avenue V513	Lauderdale Lakes, FL 33319
VP	Michael Menard	3400 BW 48th Avenue V609	Lauderdale Lakes, FL 33319
T	Sarah Shapiro	3400 BW 48th Avenue V514	Lauderdale Lakes, FL 33319
S	Pauline Rusko Robitaille	3400 BW 48th Avenue V507	Lauderdale Lakes, FL 33319

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL DULUDE
PRESIDENT

Date

Daytime Phone #

3/2/09