

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
AND
FILED

03 AUG 19 PM 6:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 726225

1. Corporation Name Okeechobee Condominium, Inc.
1285 W 26th Place
Hialeah, FL 33010

300022661843
08/29/03--01026--011 **1102.50
300022661843
08/29/03--01026--010 **61.25

2. Principal Office Address
1285 W 26th Place

3. Mailing Office Address
1285 W 26th Place

Suite, Apt. #, etc.
201

Suite, Apt. #, etc.
201

City & State
Hialeah, FL 33010

City & State
Hialeah, FL 33010

Zip Country
33010 Miami-Dade

Zip Country
33010

REINSTATEMENT 88-03

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
23-0726225

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
Adelfa Blanco

Street Address (P.O. Box Number is Not Acceptable)
1005 S.W. 191st. Lane

Suite, Apt. #, Etc.

City
Pembroke Pines

State Zip Code
FL 33029

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 X Adelfa Blanco
REGISTERED AGENT MUST SIGN

Date 08/12/2003

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	Belkis C. Hernandez	1285 W 26th Place # 201	Hialeah, FL 33010
TD	Adelfa Blanco	1005 S.W. 191st. Lane	Pembroke Pines, FL 33029
SD	Miguel A. Boza	1285 W 26th Place #201	Hialeah, FL 33010

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)(l), 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: X Adelfa Blanco
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/12/2003

Date Daytime Phone #

CR2E081 (10/02)