

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # 761078

1. Corporation Name

WESTLAND PARK CONDOMINIUM ASS.#4

Principal Place of Business

Mailing Address

1760 W. 60th. Street Unit #3
Hialeah Fl. 33012

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

1101 S.W. 141 Ave.

Suite, Apt. #, etc.

City & State

Zip Miami Fl. Country

33184 U.S.A.

3. New Mailing Office Address, If Applicable

1101 S.W. 141 Ave

Suite, Apt. #, etc.

City & State

Zip Miami Fl. Country

33184 U.S.A.

FILED

98 MAY 27 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 9798

4. Date Incorporated or Qualified
To Do Business in Florida

4-16-98

5. FEI Number

59-240-1327

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
Pres.	CONCEPCION DI GIACOMO	1101 S.W. 141 Ave	Miami Fl. 33184
Treas.	FLAVIANO GONZALEZ	1760 W. 60St. Unit #1	Hialeah Fl. 33012
Sect.	Lidia R. Diaz,	1760 W. 60St. Unit #3	Hialeah Fl. 33012

8. Name and Address of Current Registered Agent

Richard Mora

1760 W. 60St. Unit #4

9. Name and Address of New Registered Agent

Name

Concepcion Di Giacomo

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

1101 S.W. 141 Ave

Suite, Apt. #, Etc.

City

Miami Fl.

State

FL

Zip Code

33184

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

Concepcion Di Giacomo
REGISTERED AGENT MUST SIGN

Date 4-16-1998

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:

Concepcion Di Giacomo
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-1998

Date

Daytime Phone #

CR2E040 (1/98)