

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

**FILED**

98 DEC -4 PM 12:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 765727

1. Corporation Name  
Princetonian Villas Association, Inc.

Principal Place of Business 7200 NW 7 St. Suite 320 Miami FL 33126	Mailing Address 7200 NW 7 St. Suite 320 Miami FL 33126
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 7200 NW 7 Street Suite, Apt. #, etc. Suite 320	3. New Mailing Office Address, If Applicable 7200 NW 7 Street Suite, Apt. #, etc. Suite 320	4. Date Incorporated or Qualified To Do Business in Florida 11/05/82
City & State Miami FL	City & State Miami FL	5. FEI Number 59-2376628
Zip 33126 Country USA	Zip 33126 Country USA	Applied For Not Applicable
		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	Edward L. Hibshman	7200 NW 7 St., #320	Miami FL 33126
D	Johnny Caballero	10719 SW 148 Court	Miami FL 33165
D	Elizabeth Ordonez	9925 SW 35 Terrace	Miami FL 33165

**REINSTATEMENT** 96-98 TS  
12/4/98

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
	Name Edward L. Hibshman
	Street Address (P.O. Box Number is Not Acceptable) 7200 NW 7 Street
	Suite, Apt. #, Etc. 320 400002706564-4
	City Miami -12/11/98 State FL 33126

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: Edward L. Hibshman REGISTERED AGENT MUST SIGN. Date: 11/19/98

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)(f), 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: Edward L. Hibshman 11/19/98 (305261-0065)  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
Edward L. Hibshman, President/Director