

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FLORIDA DEPARTMENT OF STATE



Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -1 AM 10:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # G90103

1. Corporation Name

ROYAL T LAND, INC.

Principal Place of Business

Mailing Address

1541 SUNSET DRIVE  
SUITE 301  
CORAL GABLES FL 33143

1541 SUNSET DRIVE  
SUITE 301  
CORAL GABLES FL 33143

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

01/25/1984

5. FEI Number

59-2371360

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	MICHAELS, LAWRENCE R.	1541 SUNSET DR., #301	CORAL GABLES FL
VSD	RIEGER, RANDY	1541 SUNSET DR., #301	CORAL GABLES FL

900008759239  
11/01/02--01058--027 \*\*150.00

8. Name and Address of Current Registered Agent

FREEMAN, ROBERT, ESQ.  
2601 SOUTH BAYSHORE DRIVE  
SUITE 1423  
MIAMI FL 33131

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

Lawrence R. Michaels  
1541 Sunset Drive  
Suite 301  
Coral Gables  
FL 33143

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/31/02

11. 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:

SIGNATURE REQUIRED  
Lawrence R. Michaels

Date

Daytime Phone #

10/31/02 305-665-5826

CR2040 (8/02)

ROYAL T LAND, INC.  
1541 Sunset Drive • Suite 301  
Coral Gables, Florida 33143

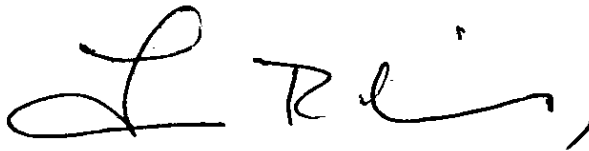
Telephone: (305) 665-5036

10/31/02

To Whom it May Concern,

Per my phone conversation  
with your office today, enclosed is the  
application for reinstatement, the \$150.<sup>00</sup>  
fee and this letter. To my knowledge  
this is the only notice we received. Thank  
you for your help.

Sincerely,

, Pres.

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Lawrence R. Michaels