

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

1 of 2

DOCUMENT # M 48273

1. Corporation Name

FERNANDEZ REALTY, INC

Principal Place of Business

1700 SW 57 AVE
STE 212
MIAMI, FL 33155

Mailing Address

10840 SW 129 ST
MIAMI, FL 33176

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

4. Date Incorporated or Qualified
To Do Business in Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59.2777070

Not Applicable

Zip

Country

Zip

Country

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)

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
PRES	HENRY FERNANDEZ	10840 SW 129 ST	MIAMI, FL 33176

200005195362--6
-04/05/02--01046--004
****915.00 ****915.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HENRY FERNANDEZ
10840 S.W. 129 ST
MIAMI, FL 33176

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

Henry Fernandez

—REGISTERED AGENT MUST SIGN

Date 3-14-02

11. This corporation owes 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:

Henry Fernandez

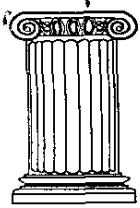
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/14/02


305 260 9300

Date Daytime Phone #

CR2E08 (12/98)



FERNANDEZ REALTY INC.

Licensed Real Estate Broker 

2 of 2

March 14, 200

Florida Department of State
P O Box 6327
Tallahassee, FL 32327

Attention: Reinstatement

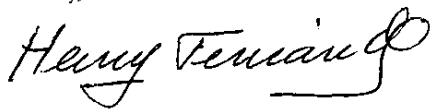
SUBJECT: FERNANDEZ REALTY, INC.

Gentlemen:

Enclosed please find check in the amount of \$915.00 to be applied toward the fees for reinstatement on Fernandez Realty, Inc.

Please abate late charges on this reinstatement. Mr. Ferandez was moving offices at that time, and was not aware of the lateness on this filing due date. And never received the filing forms.

Sincerely,



Henry Fernandez
President
Fernandez Realty, Inc