

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

2008 - 2009 1/2

FILED

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA



08112009 REIN-NP CR2E099 (1/07)

DOCUMENT # N02000002153			
1. Entity Name LARO GALLOWAY VILLAS CONDOMINIUM I, INC.			
Principal Place of Business 1122 SW 87TH AVE A6 MIAMI, FL 33174		Mailing Address 1122 SW 87TH AVE A6 MIAMI, FL 33174	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent VAZQUEZ, CARLOS A 1122 SW 87TH AVE APT #B-3 MIAMI, FL 33174			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature: Typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			

FILE NOW!!! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TARDIO, PEDRO 1122 SW 87 AVE APT A-10 MIAMI, FL 33174 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VAZQUEZ, CARLOS A 1122 SW 87TH AVE APT #B-3 MIAMI, FL 33174 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ODRIOZOLA, JOSE R 1122 SW 87TH AVENUE, APT. A-7 MIAMI, FL 33174 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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08/28/09--01047--008 \$161.25

REINSTATEMENT

08-09
07/21/08 90028 002 -
\$161.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-21-09

Date

305-310-1723

Daytime Phone #

2/2

Laro Galloway Villa Condo I Inc

1122 SW 87 Ave.

Apt A 7.

Miami, FL. 33174

Phone: 305 310-6773

► Divisions of Corporations

P. O. Box 6327,
Tallahassee, FL. 32314
Phone: 850-245-6056

To whom it may concern:

While I checking Florida Corporations on line the other day, I Became aware that our corporation had been placed in an inactive status. After speaking with your representative, I was made aware that a signature was missing from my declaration and that document was sent back for me to sign. **I did not receive that document.** Your representative asked me to draft a letter explaining why I had not signed the document and to mail you a check for \$61.25(dues for Next Year). Attached you will find my check #1246 for the next years dues and my signed documentation.

Thank You



Laro Galloway Villa Condo I Inc
Jose R Odriozola
President
8/23/2009