

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 FEB 26 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N06669

1. Corporation Name

The Gables East of Boca Barwood V Condominium
Association, Inc.

2. Principal Office Address - No P.O. Box #

23466, SW 57 Ave.

Suite, Apt #, etc

507

City & State

Boca Raton, FL

Zip

33428

Country

USA

3. Mailing Office Address

23466, SW 57 Ave.

Suite, Apt #, etc.

507

City & State

Boca Raton, FL

Zip

33428

Country

USA

800139455998

01/05/09 01075 006 -

35.00

CR2E081 (12/08)

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/17/1984

5. FEI Number

030575936

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Yasser Khan

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

23466, SW 57 Ave.

Suite, Apt #, Etc

Apt. # 507

City

Boca Raton

State

FL

Zip Code

33428

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Yasser Khan
REGISTERED AGENT MUST SIGN

Date 2/3/09

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Yasser Khan	23466, SW 57 Ave. #507	Boca Raton, FL, 33428
V/D	Nicolas Molina	5154, NW 74 th Place	Coconut Creek, FL, 33073
C/D	Jose Perez	1655, Parkside Cir S	Boca Raton, FL, 33486
			800139455998 03/05/09--01012--010 **385.00
			REINSTATEMENT
			06-09

10. 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 contained in Chapter 119, 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:

Yasser Khan

YASSER KHAN.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/09

Date

(561)451-4907

Daytime Phone #