

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

10 MAR 18 AM 7:23

DOCUMENT # N07000005056

1. Corporation Name

RESIDENCES AT VIZCAYA CONDOMINIUM ASSOCIATION, INC.

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

14600 S.W. 136TH STREET

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

Zip

33186

Country

DADE

3. Mailing Office Address

14600 S.W. 136TH STREET

Suite, Apt. #, etc.

City & State

MIAMI FLORIDA

Zip

33186

Country

Dade

4. Date Incorporated or Qualified
To Do Business in Florida **May 18, 2007**

5. FEI Number
27-1155089

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
c/o Law Offices of Eduardo Jose Garcia, P.A.

Street Address (P.O. Box Number is Not Acceptable)
Grove Professional building, 2950 S.W. 27th Ave,

Suite, Apt. #, Etc.

SUITE 300

City
Miami, FL

State Zip Code
FL 33141

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.

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03/18/10--01039--030 **358.75

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

REGISTERED AGENT MUST SIGN

Date **3/11/10**

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
DP	GARCIA-CARILLO, MICHAEL	14600 S.W. 136TH STREET	MIAMI, FL, 33186
DV	GIRAULT, MAURICIO	14600 S.W. 136 STREET	MIAMI, FL, 33186
DSST	SERVITJE, ROBERTO	14600 S.W 136 STRRET	MIAMI, FL, 33186
		REINSTATEMENT 08-10	
		TS 3/22/10	

10. E-mail Address: CBELL@VIZCAYAMANAGEMENT.COM

(To be used for future annual report notification)

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. I further certify, 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

Michael Garcia-Carillo

3-11-10

3059209188

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #