PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

# APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
**Sandra B. Mortham**
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 OCT -8 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000001091

1. Corporation Name

BUENA VISTA EAST NEIGHBORHOOD ASSOC-
IATION INC

Principal Place of Business / Mailing Address
4424 NE 1 Avenue
Miami, Florida 33137

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

2. New Principal Office Address, If Applicable
95 NE 47 St.
Suite, Apt. #, etc.
City & State: Miami, Florida
Zip: 33137 Country: Dade

3. New Mailing Office Address, If Applicable
95 NE 47 St.
Suite, Apt. #, etc.
City & State: Miami, Florida
Zip: 33137 Country: Dade

4. Date Incorporated or Qualified To Do Business in Florida
030895

5. FEI Number
65-0581360
☐ 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)

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-10/09/98--01001--001
****297.50 ****297.50

| 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 |
|---|---|---|---|
| Pres | Louis Pinellas | 153 NE 47 Avenue | Miami, Fl 33137 |
| V P | Ary Moise | 4620 NE 1 Avenue | Miami, Fl 33137 |
| Secty | Hano Mueller | 152 NE 44 St | Miami, Fl 33137 |
| Tsy | Jane Herrera | 95 NE 47 St | Miami, Fl 33137 |
| Dir | Nelson King | 58 NE 48 St | Miami, Fl 33137 |
| Dir | Victor deJesus | 144 NE 45 St | Miami, Fl 33137 |

8. Name and Address of Current Registered Agent

Kenneth E Merker
4424 NE 1 Avenue
Miami, Fl 33137

REINSTATEMENT

9. Name and Address of New Registered Agent

Name: Nelson King
Street Address (P.O. Box Number is Not Acceptable): 58 NE 48 St
Suite, Apt. #, Etc.:
City: Miami
State: FL Zip Code: 33137

92-98 TS 10/8

CR2E040 (1/98)

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 ✓ Nelson King
REGISTERED AGENT MUST SIGN
Date 9/23/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☒ N/A (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:** ✓ Nelson King
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Nelson King, Director
9/23/98 Date
305-795-8091 Daytime Phone #