

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS



FILED

03 JAN 17 PM 3:55

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **N97000001391**

1. Corporation Name

VISTA ALEGRE TOWNHOMES VILLAS STAGE II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% COURTESY PROPERTY MANAGEMENT, INC. 13250 S.W. 135TH AVENUE MIAMI FL 33186	% COURTESY PROPERTY MANAGEMENT, INC. 13250 S.W. 135TH AVENUE MIAMI FL 33186



04-29-02 90652 040 \$70.00

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.		03/13/1997	
City & State		City & State		5. FEI Number	
Zip		Country		65-0744909	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
				\$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	4 City / State / Zip
P	RODRIGUEZ, ANDRES	15490 SW 134 PLACE #511	MIAMI FL 33177
TS	YOLISE MOBELA Yoise Valdes	13404 SW 153 TER #2106 13404 SW 153 Ter, #2106	MIAMI FL 33177
D	LOUISE REVILLA Louie Revilla	15501 SW 133 PLACE #804 15501 SW 133 Place, #804	MIAMI FL 33177
AT	PRETTO, AMAURY	13446 SW 153 TERR #2106	MIAMI FL 33177

8. Name and Address of Current Registered Agent

GONZALEZ, JESUS R
 11936 SW 8TH ST
 MIAMI FL 33184

9. Name and Address of New Registered Agent

Name **SKRLO, INC**
 Street Address (P.O. Box Number is Not Acceptable) **201 AHAMBRA Circle #1102**
 Suite, Apt. #, Etc.
 City **CORAL GABLES** State **FL** Zip Code **33134**

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. or 617.0505, F.S.

Signature of Registered Agent

[Signature]
SIGNATURE REQUIRED
 REGISTERED AGENT MUST SIGN

Date

11/7/02

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 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:

[Signature]
SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/10/03

CR2E040 (8/02)

C O U R T E S Y
PROPERTY MANAGEMENT

October 25, 2002


Florida Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL. 32314

Re: Vista Alegre Townhome Villas, Stage 2
Dissolution of Corporation

To Whom It May Concern:

I am in receipt of your notice of administrative dissolution for Vista Alegre Stage 2. Please be informed that back in May 2002, management sent a \$70.00 check which included the \$8.00 cost for the Certificate of Status. Management was under the impression that we met the deadline and that the corporate status was current.

When I received your notice of dissolution I contacted your office immediately and was told that a letter requesting additional information had been sent on May 1, 2002. Please be informed that management never received this letter.

Due to the fact that management never received this letter I respectfully request that all late fees and penalties are waived. I ~~will~~ update the necessary information and return it ~~as soon as possible~~. Attached. 

Thank you in advance for your assistance in this matter. If you have any further questions regarding this matter please contact me at (305) 254-3888 ext. 120.

Sincerely,
FOR THE BOARD OF DIRECTORS


Madalyn Repaci,
Property Manager

