FILED

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SECRETARY OF STATE

TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION	
REINSTATEMENT	J



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N99000000183

1. Corporation Name

CORAL VILLAS HOME OWNERS ASSOCIATION INC.

1	R
M	P

2. Principal Office Address 13864 SW 153 TERRACE		3. Mailing Office Address 13898 SW 153 TERRACE		400025727544 12/23/03-01034-047 0EMSTATEMENT 7	
Suite, Apt. #, etc. City & State Miami, FL		Suite, Apt. #, etc. City & State Miami, FL		WESTED SAS FOR	
				4. Date Incorporated or Qualified To Do Business in Florida 01/12/1999	
				Zip	Country
33177	USA	33177	USA	CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
		7. Name	and Address of Current Regis	stered Agent	
Na	Eddie Diaz				
C+	reet Address /D.O. Boy Number in	Not Assertable		·	····

Eddie Diaz		
Street Address (P.O. Box Number is Not Acceptable) 13864 SV	V 153 Terrace	
Suite, Apt. #, Etc.		
^{City} Miami	State FL	Zip Code 33177-1197

Registered		Date				
9. Names	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			
PD	Diaz, Eddie	13864 SW 153 Terrace	Miami, FL 33177			
D	Rodriguez, Riquelme	13832 SW 153 Terace	Miami, FL 33177			
D	Otero, Charles	13848 SW 153 Terrace	Miami, FL 33177			

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 filling 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 trye and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

EDDIE DIAZ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 12/18/03

(305) 278-7961

Date

Daytime Phone #

2002

CORAL VILLAS HOME OWNERS ASSOCIATION 13898 SW 153 TERRACE MIAMI, FL 33177

December 18, 2003

RE: Reinstatement

Coral Villas Home Owners Association

Doc. # 9000000183

Dear Sir/Ma'am,

During a recent review of our records, we discovered that the Annual Report for 2003 had not been paid. In further review we found no record of receiving the Annual Report Form this year. Upon contacting your office we were made aware that our corporation had been dissolved for non filing.

We kindly request reinstatement of our non-profit corporation and that reinstatement fees be waived. Attached is the reinstatement form along with the \$61.25 filing fee. Should you have any questions, please contact me at (305) 803-7961.

Sincerely,

President, Coral Villas HOA