

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1062

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 MAY -3 PM 4:21

DOCUMENT # N99000003188

1. Corporation Name

West Lake Civic Group
INC.

200005598612--7
-05/23/02--01004--020
****122.50 ****122.50

2. Principal Office Address

9008 NW 152 Lane

3. Mailing Office Address

9008 NW 152 Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Lakes, FL

City & State

Miami Lakes, FL

Zip

33018

Country

U.S.

Zip

33018

Country

U.S.

4. Date Incorporated or Qualified
To Do Business in Florida

5/14/99

5. EEL Number

65-0929519

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

Henry Villarreal

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

9008 NW 152 Lane

Suite, Apt. #, Etc.

City

Miami Lakes

State

FL

Zip Code

33018

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

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
Pres	Henry Villarreal	9008 NW 152 Lane Miami Lakes, FL 33018	
VP	Pedro Carballo	15832 NW 83 Place	Miami Lakes, FL 33018
Dir.	Ricardo Benovides	14422 NW 88 Place	Miami Lakes, FL 33018
Tres.	Nancy Sanu	7750 NW 162 Terr.	Miami Lakes, FL 33018
Dir.	Jackie Santana	8741 NW 148 Terr.	Miami Lakes, FL 33018
Dir.	Dianna Montes	8315 NW 166 St.	Miami Lakes, FL 33018

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 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:

Diane Dominguez
Diane Dominguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/22/02

Daytime Phone #

954-797-5297

CR2E081 (9/01)

ND

WEST LAKE CIVIC GROUP, INC.
9008 N.W. 152 Lane
Miami Lakes, FL 33018

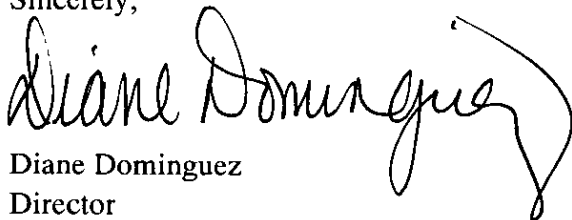
March 22, 2002

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

Dear Sirs,

Attached is the application for reinstatement for the West Lake Civic Group, Inc. Please be advised that we have never recieved the Business Report Filing Forms. As such, enclosed please find a check in the amount of \$122.50 which constitutes our reinstatement fee.

Sincerely,


Diane Dominguez
Director